Approval Form (1B)
A completed form is required for each student, including all team members.

 To Be Completed by Student area. Student Acknowledgment: I understand the risks and possib I have read the ISEF Rules and Gresearch. I have read and will abide by the 	le dangers to me uidelines and will	adhere to all Internationa	
Student researchers are expected to maintain are not condoned at any level of research or on or presentation of other researcher's work as competition in affiliated fairs and ISEF.	n the highest star competition. Such	ndards of honesty and integ	not limited to plagiarism, forgery, use
Melissa Ramkissoon	Hullya K		11/19/19
Student's Printed Name	Signature		Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)
b. Parent/Guardian Approval: I have re Research Plan/Project Summary. I c	consent to my chi	ld participating in this res	earch.
MARLYN.R	Marly . K	combisses)	11 19 119
Parent/Guardian's Printed Name	Signature		Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)
2. To be completed by the local or affiliated Fair SRC (Required for projects requiring prior SRC/IRB APPROVAL. Sign 2a or 2b as appropriate.)			
a. Required for projects that need prior SRC/IRB approval BEFORE experimentation (humans, vertebrates or potentially hazardous biological agents). The SRC/IRB has carefully studied this project's Research Plan/Project Summary and all the required forms are included. My signature indicates approval of the Research Plan/Project Summary before the student begins experimentation.		b. Required for research conducted at all Regulated Research Institutions with no prior fair SRC/IRB approval. This project was conducted at a regulated research institution (not home or high school, etc.), was reviewed and approved by the proper institutional board before experimentation and complies with the ISEF Rules. Attach (1C) and any required institutional approvals (e.g. IACUC, IRB).	
SRC/IRB/Chair's Printed Name		SRC Chair's Printed Na	me
Signature Date of Appro (Must be prior to e	val (mm/dd/yy) xperimentation.)	Signature	Date of Signature (mm/dd/yy) (May be after experimentation)
3. Final ISEF Affiliated Fair SRC Approval (Required for ALL Projects)			
SRC Approval After Experimentation and Before I certify that this project adheres to the approved	Competition at Re Research Plan/Pro	egional/State/National Fair ject Summary and complies w	vith all ISEF Rules.
Regional SRC Chair's Printed Name	Signature		Date of Approval (mm/dd/yy)
State/National SRC Chair's Printed Name	Signature		Date of Approval (mm/dd/yy)

(where applicable)