Approval Form (1B)

A completed form is required for each student, including all team members.

1. To Be Completed by Student and Parent

- a. Student Acknowledgment:
 - I understand the risks and possible dangers to me of the proposed research plan.
 - I have read the ISEF Rules and Guidelines and will adhere to all International Rules when conducting this research.
 - I have read and will abide by the following Ethics statement

• Thave read an	u wili abide by tr	ie rollowing Ethics s	idle	ement		
are not condoned at any le	evel of research of esearcher's work	or competition. Such	pra	ctices include but are	grity. Scientific fraud and misconduct not limited to plagiarism, forgery, use ent projects will fail to qualify for 04/01/19	
Research Plan/Pr	oject Summary.			he risks and possible o		
Mohammad Alauddin)-	04/01/19	
Parent/Guardian's Printe	d Name	Signature —	1		• Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)	
a. Required for projects that need prior SRC/IRB approval BEFORE experimentation (humans, vertebrates or potentially hazardous biological agents).				b. Required for research conducted at all Regulated Research Institutions with no prior fair SRC/IRB approval.		
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.				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 Name		
Signature		proval (mm/dd/yy) to experimentation.)		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 Experi I certify that this project ad			_		vith all ISEF Rules.	
Regional SRC Chair's Printe	d Name	Signature			Date of Approval (mm/dd/yy)	

Signature

State/National SRC Chair's Printed Name

(where applicable)

Date of Approval (mm/dd/yy)