

Student Checklist (1A)

This form is required for ALL projects.

1. a. Student/Team Leader: Farihah Chowdhury Grade: 12
Email: farihahchow@gmail.com Phone: (646) 988-1958
b. Team Member: _____ c. Team Member: _____
2. Title of Project:
Potential Pitfalls in Protein Structure Determination via Protein Crystallography
3. School: William Floyd High School School Phone: (631) 874-1120
School Address: 240 Mastic Beach Road, Mastic Beach, NY 11951
4. Adult Sponsor: Victoria Hernandez Phone/Email: vhernandez@wfsd.k12.ny.us
5. Does this project need SRC/IRB/IACUC or other pre-approval? ☐ Yes ☒ No Tentative start date: 1/15/19
6. Is this a continuation/progression from a previous year? ☒ Yes ☐ No
If Yes:
a. Attach the previous year's ☒ Abstract and ☒ Research Plan/Project Summary
b. Explain how this project is new and different from previous years on
☒ Continuation/Research Progression Form (7)
7. This year's laboratory experiment/data collection:
2/1/2019
Actual Start Date: (mm/dd/yy) _____ End Date: (mm/dd/yy) _____
8. Where will you conduct your experimentation? (check all that apply)
☒ Research Institution ☐ School ☐ Field ☐ Home ☐ Other: _____
9. List name and address of all non-home and non-school work site(s):
Name: Brookhaven National Laboratory
Address: 98 Rochester St., Upton, NY 11973
Phone/ email: (631) 344-8000
10. Complete a Research Plan/Project Summary following the Research Plan/Project Summary instructions and attach to this form.
11. An abstract is required for all projects after experimentation.