Student Checklist (1A) This form is required for ALL projects.

1	a. Student/Team	l eader:	Antonia Pa	avek	Gra	de.	10	
٠.			@amail.co	·m	Phor		631-848-5327	
	· · · · · · · · · · · · · · · · · · ·	Email: miraculum08@gmail.com D. Team Member: Yousuf Suleman		c. Team Member:				
2.	Title of Project:							
	The Effects of Ganoderma lingzhi and Lentinula edodes on the Regeneration Rates and Longevity of Lumbriculus variegatus							
3.	School: Sachem High School East				School Phone: 631-716-8200			
	School Address:	177 Granny Rd.						
		Farmingville, NY 11738						
4.	Adult Sponsor:	Michae	l Vaccariel	lo, PhD	Phone/Email	l: <u>63</u>	31-338-7561/ mikevac67@gmail.com	
5.	Does this project	es this project need SRC/IRB/IACUC or other pre-approval? 🗖 Yes 🗹 No Tentative start date: 09/06/19						
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:							
	09/09/19							
	Actual Start Date: (mm/dd/yy)				End Date: (mm/dd/yy)			
Ω	Where will you c	onduct w	ur evnerimer	ntation?/check:	all that annly)			
Ο.	Research Inst	•	-	☐ Field	☐ Home		l Other:	
							.	
	List name and add ame:				ork site(s):			
INd	anne							
Ad	dress:				<u> </u>			
Pho em	one/ ail ————							
10	. Complete a Rese and attach to thi		n/Project Sum	mary following	g the Research	Plai	n/Project Summary instructions	
11	. An abstract is re	auired fo	r all projects a	after experime	ntation.			