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

1. a. Student/Team Leader: _SShamtej Singh Rana_   Grade: _12_

     Email: _shamtejrana711@gmail.com_   Phone: _(646) 510 6937_

     b. Team Member: _____   c. Team Member: _____

2. Title of Project:

WILDFIRE PREDICTION AND REDUCTION FOR THE WEST COAST OF THE USA USING A NEURAL NETWORK APPROACH

3. School: _Commack High School_   School Phone: _(631) 912 2100_

     School Address: _1 Scholar Lane Commack NY 11725_

4. Adult Sponsor: _____   Phone/Email: _____

5. Does this project need SRC/IRB/IACUC or other pre-approval? ☐ Yes   ☑ No   Tentative start date: _7/1/19_

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:

    07/01/19   11/13/19

    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:	New York Institute of Technology	_____
Address:	101 Northern Blvd, Glen Head	_____
	NY 11545	_____
Phone/ email	(516) 686 4700	_____

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.**