

# 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 MSSEF/ISEF Rules and Guidelines and will adhere to all State and International Rules when conducting this research.
- I have read and will abide by the following Ethics Statement and the MSSEF Ethics Statement on [www.scifair.com](http://www.scifair.com)

Scientific fraud and misconduct are not condoned at any level of research or competition. Such practices include plagiarism, forgery, use or presentation of other researcher's work as one's own, and fabrication of data. Fraudulent projects will fail to qualify for competition in affiliated fairs or the ISEF.

\_\_\_\_\_  
Student's Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date Acknowledged

(Must be prior to experimentation.)

- b) **Parent/Guardian Approval:** I have read and understand the risks and possible dangers involved in the **Research Plan**. I consent to my child participating in this research.

\_\_\_\_\_  
Parent/Guardian's Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of Approval

(Must be prior to experimentation.)

### 2a) Required for projects requiring prior SRC/IRB APPROVAL.

### 2b) ALL Students, Parents/Guardians, Teachers/Adult Sponsors, and Qualified Scientists must sign the MSSEF Ethics Statement.

#### 2a) Required for projects that need prior SRC/IRB approval BEFORE experimentation

The SRC/IRB has carefully studied this project's **Research Plan** and all the required forms are included. My signature indicates approval of the **Research Plan** before the student begins experimentation.

\_\_\_\_\_  
SRC/IRB Chair's Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of Approval

(Must be prior to experimentation.)

Region:  I  II  III  IV  V  VI State:

#### 2b) I have read and will adhere to the MSSEF Ethics Statement\*. I understand that parents cannot be their child's Teacher, Mentor, Qualified Scientist, or Designated Supervisor.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Teacher/Adult Sponsor's Signature

\_\_\_\_\_  
Date

#### **IF APPLICABLE:**

\_\_\_\_\_  
Qualified Scientist/Designated Supervisor's Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*The Ethics Statement is found in the manual and on the website ([www.scifair.com](http://www.scifair.com))

## 3) Final ISEF Affiliated Fair SRC Approval. (Required for ALL Projects)

### SRC Approval After Experimentation and Shortly Before Competition at Regional/State/National Fair

I certify that this project adheres to the approved **Research Plan** and complies with all MSSEF/ISEF Rules.

\_\_\_\_\_  
Regional SRC Chair's Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of Approval

\_\_\_\_\_  
State/National SRC Chair's Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of Approval

(where applicable)

**MSSEF/ISEF Forms 2009/2010 full text of the rules and copies of forms are available at [www.scifair.com](http://www.scifair.com)**