

Eastern SD Science and Engineering Fair- Junior Division Project Form

Title of Project: _____

Researcher Name(s): _____

School: _____

Teacher/Adult Sponsor Name: _____

I agree to supervise the student researcher while conducting their study and will guide them to ensure both the researcher and any research subjects (human or animal) are kept safe from harm.

Teacher/Adult Sponsor Signature: _____ Date: _____

Acknowledgements:

Student:

- I agree to identify and discuss any possible dangers of my study with both my adult sponsor and parent/guardian to keep myself safe.
- I agree to follow the ESDSEF Rules and Guidelines and the ESDSEF Ethics Statement.
- I will submit a complete research plan with this form completely explaining the project

Researcher Signatures:

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. I authorize the ESDSEF to publish photo and/or video taken of me or the above listed student and our names for use in the ESDSEF printed publications, website, training, recruiting and media outreach purposes.

Parent/Guardian Signatures and date:

Where are you conducting your research? (Check Box)

School/Home/Field- No further information needed.

Local Business- Please include letter from business, acknowledging your project and that you have their permission and supervision during your project.

Medical Facility, University or other regulated research institution- Contact Fair Director for advice on any additional paperwork needed.

Risk Management:

What risks have been identified? (Flames, devices, electricity, chemicals, activities could all be considered as risks)

How have these been managed?

Is this project a continuation of a previous year's work? (Check Box)

Yes, please attach previous years research plan or abstract.

No

Use of Human Subjects: (Check Box)

This project **DOES NOT** use humans as subjects of research (If checked move to Animal Section)

This project **DOES** use humans as subjects of research. (This project must be submitted to ESDSEF BEFORE starting the project for review)

To be completed by teacher and school administrator:

I have reviewed this project and it has minimal to the research subjects, I have notified parents of those students who may be a part of this study and I approve of this study occurring in our school:

Teacher Signature: _____ Date: _____

School Administrator Signature

Use of Vertebrate Animals: (Check Box)

This project **DOES NOT** use vertebrate animals (If checked you may move to Vertebrate Tissue Section)

This project **DOES** use vertebrate animals as subjects of research. (This project must be submitted to ESDSEF BEFORE starting the project for review)

To be completed by local veterinarian (ESDSEF will notify if this is a requirement before experimentation)

I have reviewed this project and agree to discuss any animal safety concerns with the student researcher(s) and if any issues arise from this study I am willing to assist.

Local Veterinarian Signature: _____ Date: _____

Use of Vertebrate Tissue Section (For example: Blood, saliva, teeth, uncooked meats, eggs.) (Check Box)

This project **DOES NOT** use any vertebrate tissue (If Checked you may move to microorganism section)

This project **DOES** use vertebrate animal tissue research. Note: Any human teeth should be autoclaved. (This project must be submitted to ESDSEF BEFORE starting the project for review)

To be completed by adult sponsor:

I have discussed safe handling methods for vertebrate tissues in this study (including proper safety equipment) and will assist as needed:

Adult Sponsor Signature: _____ Date: _____

Use of Microorganism Section (For Example: Culturing Bacteria or Viruses) (Check Box)

This project **DOES NOT** use any microorganisms as a part of the study.

This project **DOES** use microorganisms as a part of the study. (Check box below)

- Microorganism will be swabbed and sealed inside a petri dish. once sealed it will not be opened. .
(This project must be submitted to ESDSEF BEFORE starting the project for review)
- Ecoli K12 will be used and may be opened after culture. (This project does not need ESDSEF Review)
- Other: Explain: _____
(This project must be submitted to ESDSEF BEFORE starting the project for review)

To be completed by adult sponsor:

I will supervise student while culturing microorganisms and students will use approved safe lab practices:

Adult Sponsor Signature: _____ Date: _____