NEIRSEF Regional Junior Division Checklist and Approval Form

*Student Name _____

*School _____ *Grade _____

*Project title _____

*Is this a team project ☐ YES ☐ NO *(If YES, **each team member fills out this form** but the team **jointly submits one research plan** and if required, **one set** of supporting forms*

The student and I have reviewed the research plan. We have discussed the risks and will follow necessary safety precautions as indicated in the ISEF Rulebook www.societyforscience.org/isef/document/completerules2009.pdf. This student agrees to present their original work and data results. All other sources used in any phases of the research will be properly cited.

*Teacher/Adult Sponsor (Print name) _____ *Email _____

*Teacher/Adult Sponsor Signature _____ *Date _____

*Student Signature _____ *Date _____

I have read and understand the risks and possible dangers involved in the Research Plan. I consent to my child participating in this research. My child will also follow the NE IN Regional Science & Engineering Fair display rules found at www.ipfw.edu/scifair/DisplayRules.htm should they be chosen to advance to the Regional Fair.

*Parent/Guardian (Print name) _____

*Student or Parent Email (Used for project & fair communication) _____

*Parent/Guardian Signature _____ *Date _____

Based on your answers in the online pre-review questionnaire, your project requires pre-review **OR** is exempt from pre-review. Please check the appropriate box and include the applicable form along with the research plan.

*My project involves:

☐ humans as subjects: **complete and attach Regional Human Subject form**

☐ vertebrate animals: **complete and attach Regional Vertebrate Animal form**

☐ potentially hazardous biological agents: **complete and attach Regional Risk Assessment form**

☐ hazardous chemicals, activities, or devices: **complete and attach Regional Risk Assessment form**

☐ None of the above: **my project is exempt from additional pre-review forms**

*What date are you planning on starting the experiment? _____

Signatures above must be obtained and dated BEFORE experiment begins. If research requires pre-review (any YES answers to the online questionnaire), do not begin experiment until SRC approval is also given.

*Where will experiment be conducted? ☐School ☐Field ☐Home ☐Other: List name and address

Research Plan Guide

This form is optional and may be used to guide the student through the process of writing their research plan. Please note that if the student uses a different format, these elements still should be included in the research description.

1. State your purpose or question:

2. State your hypothesis (an educated guess):

3. Describe the procedures you will follow in your experiment to test your hypothesis:

4. Describe how you will collect and analyze your data:

5. How will you show your results?

List 3 references used in research

Regional Human Subject Junior Division Form

Form required only if research involves human subject

You may answer a question with "see research plan" if the answer is detailed in your plan

1. Who will be participating? (list general groups such as family, friends; NOT individual names)

2. What are the participants asked to do? (be specific such as length of time required)

3. How will you inform the participant/parent about the research and gain their consent to participate? *All human subject research requires at least verbal, if not written, consent from the participant and (if under 18) their parent. The reviewer will indicate if your project requires written consent (box below). With your research plan, include a copy of the blank consent form you will use if the reviewer requires it. Participant and parent consent is obtained after the reviewer approves your research plan.*

4. Who will supervise the experiment?

5. Some projects (i.e. strenuous exercise, ingesting food/drink) require advice from a qualified professional such as a nurse or other professional in the field. If your project is one of these, who will advise you?

6. Does the project involve…(mark all that apply with an X)

   ☐ music, videos, movies, etc? If yes, include list of titles with research plan and to participants and their parents. *Age appropriateness & volume are factors considered for informed consent from participant and parent.*

   ☐ tasting or eating foods or beverages? If yes, then the research plan should include what specific items will be tasted (list the actual foods) and this information must be given to the participant and parent.

   ☐ exercise? If yes, what type and for how long?
   If yes, does this differ from what is done in gym class or everyday activity?

   ☐ surveys or questionnaires? If yes, attach the survey or list of questions.
   Describe how the survey will be administered and by whom.

7. List any potential discomfort to the participants such as physical, social, or emotional.

8. Describe safety measures maintained to protect participants from those mentioned in question #7.

9. How will you protect the privacy of your participants and their results?

For office use only

Researcher must obtain written consent by participants & (if under age 18), their parent. _____Yes _____ No

IRB Signature_____ Date _____ SRC Pre-Review _____ Post _____

Regional Consent Form for Human Subject Research

All human subject research requires at least verbal, if not written, consent from the participant and (if under 18) their parent. Students doing a human subject project should have a consent form prepared with the research plan. The student may create a consent form themselves or use this form. The reviewer will indicate IF written consent will be required. Researchers inform and gain consent from participants/parents AFTER the project has been approved.

Name of Student Researcher_____

Project Title _____

The researcher must inform potential subjects about the purpose of their study and what they will be asked to do. They must be informed that their participation is voluntary and they may withdraw at any time.

To be completed by Subject before they participate:

I have been informed of the purpose of this study and what I will be asked to do. I understand the conditions and risks involved. I realize I am free to withdraw from this study without negative consequence.

Name of Participant _____

Signature of Participant_____ Date_____

If participant is under age 18, to be completed prior to participation by Parent/Guardian.

I have been informed of the purpose of this study and what my child will be asked to do. I understand the conditions and risks involved. I have reviewed what will be used in this study such as a survey or questionnaire, list of food products, or audio/visual items (if applicable). I give my consent to allow my minor child to participate.

Name of Parent/Guardian_____

Signature _____ Date_____

Regional Vertebrate Animal Junior Division Form

Form required only if research involves vertebrate animals, defined as live, nonhuman vertebrate mammalian embryos or fetuses, tadpoles, bird and reptile eggs within 72 hours of hatching, and all other nonhuman vertebrates (including fish) at hatching or birth.

You may answer a question with "see research plan" if the answer is detailed in your plan

1. What kind of animal(s) are you using and how many will be involved?

2. Who owns the animal(s)?

3. How will the animal(s) be housed?

4. Will the animal(s) be fed and watered daily? ☐ YES ☐ NO

5. How often will the animal be observed?

6. Will the animal be subject to any discomfort? ☐ YES ☐ NO

   If YES, what measures will be taken to reduce the level of discomfort?

7. If the animal is not your family pet, what will happen to it after the experiment?

8. Who will supervise your experiment?

9. Some projects require the advice of a qualified professional, such as a vet. If your experiment requires this, who will be advising you?

For official use only:

SRC Signature_____ Date_____ SRC Pre-Review_____ Post _____

Regional Risk Assessment Junior Division Form

Form required only if research involves potentially hazardous biological agents and/or hazardous chemicals, activities or devices.

You may answer a question with "see research plan" if the answer is detailed in your plan

The following types of tissue do not need to be treated as potentially hazardous biological agents:

- ***Plant tissue***
- ***Established cell and tissue cultures (e.g. obtained from the American Type Culture Collection)***
- ***Meat or meat by-products obtained from food stores, restaurants, or packing houses***
- ***Hair***
- ***Teeth that have been sterilized to kill any blood borne pathogen that may be present***
- ***Fossilized tissue or archeological specimens***
- ***Prepared fixed tissues***

1. Are you using any potentially hazardous biological agents including fresh/frozen tissue, blood or blood products, or body fluids? ☐ YES ☐ NO

   If you answered YES, then complete the following:

   List potentially hazardous biological agents:

   Where was it obtained?

   Where will you be doing the research?

   Some projects require advice from a qualified professional. If your project is one of these, who will advise you?

   Who will supervise your experiment?

   How will the materials be safely handled (i.e. safety glasses, mask, gloves, etc.) during the experiment and how will it be disposed of?

2. Are you using hazardous chemicals, activities or devices such as *DEA-controlled substances, prescription drugs, alcohol, tobacco, firearms, explosives, radiation, lasers, etc?*

   ☐ YES ☐ NO

   If you answered YES, then complete the following:

   What risks are involved?

   Who will supervise your experiment?

   What safety precautions will be taken to reduce the risk?

   If applicable, what disposal procedures will be used?