Westridge STEM Fair Entry Form

Entry Form due to your teacher by **December 18**, 2019 STEM Fair January 15 & 16, 2020

Project Type:	ndividual 🗆 Team Number of Te	am Members: 2 2
Student 1: Grade: First Name: Last Name: Teacher:	Last Name:	Team Member 3: Grade First Name: Last Name: Teacher:
Project Category	(check one):	
Physics (Astrono & Mathematics)Computer ScierEngineering) Product Testing &	□ Earth 8 Environmental Science
Project Approval:		
Students must use ap	n the special project requirements or ppropriate facilities and have signatects that require special approval.	
Project Summary:		
Please complete the	e "Project Summary" page attached	d.
Parent/Guardian Signature I have read the rules	gnature: s and requirements with my child an	d acknowledge that:
human participants, they have conducte	ing extra items to display with their particles, animals, bacteria, mold, fungus, or ed their project in the appropriate for project in the appropriate for produces (see back of form).	other harmful materials,
(Parent Signati	 ure)	(Date

Project Approval

Read through each category. If your project fits the requirement of any of the categories below, you MUST obtain the appropriate signature BEFORE starting your project.

Prescription Hazardous **Human Test** Non-Human Bacteria, Mold, Fugi, Viruses, or or Over the Chemicals, Subjects (ex: survey, Vertebrate taste test, play a game, or interact with in any way) Counter Weapons, Animals (ex: fish, Parasites, Human rabbits, dogs, etc.) or Animal Fresh Drugs, Firearms, Tissues, blood or Alcohol. Lasers. A copy of the surveys Experiments involving or tests you intend to body fluids, etc. Tobacco Radiation, etc. laboratory animals (rats, use must be attached. (Potentially Hazardous mice, hamsters, gerbils, Biological Agents) During the review, if Students must Students must adhere rabbits, etc) cannot be it is determined that adhere to all to federal and state conducted in a stuent's Determine the level of there is more than federal, state, and home except for behavior regulations governing biological containment minimal hazardous substances local laws when studies on pets. Proper available to the student psychological or acquiring and or devices. Students animal care must be researcher. Biosafety physical risk to the handling controlled under 21 may not provided daily, including human subjects Level 1 projects can be substances. Only handle or purchase weekends, holidays, and performed in a school involved in the under the direction smokeless powder or vacations. Experimental project, the student BSL-1 laboratory but are of a qualified black powder for procedures that cause prohibited in the home must receive written scientist or science projects unnecessary apin or environment. consent from each of designated An adult must directly discomfort are Bacteria, mold, fungi, or the participants and supervisor may a supervise the prohibited. Experiments any other written parental student use experiments. designed to kill potentiallyhazardous consent for students federally controlled Students working vertebrate animals are not biological agent under 18 years old. or experimental with hazardous permitted. Behavioral CANNOT be cultured at Signature pages must substances for substances or devices studies or supplemental home, Standard be included with must follow proper therapy or nutritional studies microbiological practices registration form. If it safety procedures for involving pets or experimentation. . must be used and all is determined that each chemical or livestock may be done at hazardous agents must be there are unacceptable device used in the home. properly disposed of at ☐ Applies to risks involved the research. the end of student must revise this Project ☐ Applies to this experimentation. The his or her project. ☐ Applies to experiment must be Project Required supervised by a qualified this Project ☐ Applies to Signatures: scientist or a trained Required Signatures: Biomedical/ this Project designated supervisor. Required Veterinarian or other **Biological Scientist** Signatures: Biomedical/ Biological Required ☐ Applies to this School Scientist Signatures: Administrator Project Psychologist, Medical Doctor, or Required Signatures: Registered Nurse. Biomedical/

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Name:	Position:	
Signature:	Date:	Email:

Biological Scientist

Project Summary

Student Name:
State the question or problem
Summarize Background Research
Materials List
Project Summary