ELEMENTARY PROJECT APPROVAL FORM

This completed form is required for ALL projects.

1)	Student's Name:		Grade:
	Email (Optional):		
	(Team) 2 nd Student's Name:		
	Email (Optional):		
	(Team) 3 rd Student's Name:		Grade:
	Email (Optional):		
2)	Title of Project:		
3)	Briefly outline or describe your Research Plan:		
4)	School:	School Pho	one:
	School Address:		
1)	REQUIRED FOR ALL PROJECT	 ГЅ	
a)	Student Acknowledgment:		
	☐ I am sure that my project does not involve hazardous materials, chemicals, activities, or devices and does not place humans or animals at risk.		
	My experiment as described in the Research Plan will be performed in a safe environment and will not endanger others.		
	Student's Printed Name	Signature	Date Acknowledged (Must be prior to experimentation.)
	Parent/Guardian Approval: I have read and ticipating in this research and certify that the		n Plan. I consent to my child
раі	ticipating in this research and certify that the	research will be conducted	Salety.
	Parent/Guardian's Printed Name	Signature	Date of Approval (Must be prior to experimentation.)
c) stu	Teacher Approval: I have read and underst dent.	tand the Research Plan an	d certify that it is safe for the
	Teacher's Printed Name	Signature	Date of Approval
T	his form must be with the student's projec Team projects onl		