

Project Approval Form
This form is required for ALL projects.

Student Name _____ Teacher Name _____

Parent/Guardian _____ Phone/Email _____

Team Member _____
(Team Projects only)

Start Date _____ Expected End Date _____
All work on the project must be done during the current school year.

Complete the questions below to share your Project Plan (see other side for instructions):

Project Problem _____

Rationale _____

Summary of Procedure _____

Method of Data Collection _____

Potential Risks and Safety Precautions _____

Expected Outcomes _____

Where will you conduct your project testing? (Check all that apply.)

___ Research Institution ___ School ___ Field ___ Home ___ Other

List name, address, and contact information of all non-home and non-school work site(s):

I have read and discussed the Ethics Agreement and have included it with my logbook.

Student Signature

Parent/Guardian Signature

See other side for instructions, teacher approval, and possible required forms.



Project Plan Instructions

Project Problem: Depending on your project, your problem will be one of the following:

- What question are you trying to answer?
- What problem are you trying to solve?

Rationale: Why do you want to do this project? Why is it important?

Summary of Procedure: Describe your plan and procedure for addressing your problem. Make sure to include enough detail so the committee can clearly see what you are planning to do with your project.

Method of Data Collection: What are you measuring? How will you measure it?

Risk and Safety: Identify any potential risks and safety precautions needed. (see Student Handbook)

Expected Outcomes: What do you think will happen? What do you expect to learn?

Where will you conduct your project testing? If you are conducting testing any place other than your home or school, list the location. Even if it's a park or outdoor site, you need to give an approximate location. If it is a research institution, list the name and contact information for the site.

For Teacher Use Only

This project has received preliminary approval. _____
Teacher Signature

	Division	Category
<input type="checkbox"/>	Science	Animal Sciences
<input type="checkbox"/>	Science	Plant Sciences
<input type="checkbox"/>	Science	Microbiology
<input type="checkbox"/>	Science	Earth and Environmental Sciences
<input type="checkbox"/>	Science	Chemistry
<input type="checkbox"/>	Science	Physics and Astronomy
<input type="checkbox"/>	Engineering	Environmental Engineering
<input type="checkbox"/>	Engineering	Engineering Mechanics
<input type="checkbox"/>	Computer Science	Robotics and Intelligent Machines
<input type="checkbox"/>	Computer Science	Coding

Forms Required	
<input type="checkbox"/>	Risk Assessment and Designated Supervisor Form
<input type="checkbox"/>	Ethics Agreement
Additional Forms that Might be Needed	
<input type="checkbox"/>	Qualified Scientist Form
<input type="checkbox"/>	Vertebrate Animal Care Form
<input type="checkbox"/>	Informed Consent for Testing of Human Subjects
<input type="checkbox"/>	Teacher Verification of Informed Consent Forms
<input type="checkbox"/>	BSL-1 Checklist
<input type="checkbox"/>	Student Use of Drones