

Revised–Regulated Research Institutional/Industrial Setting Form (1C)

This form must be completed **AFTER** experimentation by the adult supervising the student research either virtually or on site, conducted in a regulated research institution, industrial setting or any work site other than home, school or field.

Student's Name(s) _____

Title of Project _____

To be completed by the Supervising Adult in the Setting (NOT the Student(s)) after experimentation:

(Responses must be on the form as it is required to be displayed at student's project booth; please do not print double-sided.)

Research was supported at my work site:

1. Describe the student experience at your work site (check all that apply):

- Used Equipment Yes No
- Minimal interaction with our group Yes No
- Mentored by me or someone else from our group Yes No
- Worked as a sub-set of our ongoing research Yes No
- Had an independent project from our group Yes No

2. Please describe the independent and/or creative work done by the student in any phase of the project, but particularly in developing the hypotheses or engineering goals of the project

3. Detail the student's role in conducting the research (e.g. data collection, specific procedures performed). Differentiate what the student observed and the student actually did.

4. Did the student(s) work on the project as part of a group? Yes No
Were there other high school students present? If yes, please list the students names and describe how their work was related or different from the work of this project.

5. If this project is under a grant and needs to be acknowledged, please list the grant statement here.

I attest that the student has conducted the work as indicated above and that any required review and approval by institutional regulatory board (IRB/IACUC/IBC) has been obtained. Copies are attached if applicable. I further acknowledge that the student will be presenting this work publicly in competition and I have communicated with the student research regarding any requirements for my review and/or restrictions of what is publicized.

Direct Supervisor's Printed Name

Signature

Title

Institution

Date Signed (must be after experimentation) (mm/dd/yy)

Address

Email/Phone