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|----------------------|------------------------------------------------------------------------|
| Project Title:       |                                                                        |
| Student Name(s):     |                                                                        |
| School, City, State: | Team Project: <input type="checkbox"/> YES <input type="checkbox"/> NO |

|                                              |                                                                            |
|----------------------------------------------|----------------------------------------------------------------------------|
|                                              | <b>CATEGORY:</b><br>Pick ONE only.<br>Mark an "X" in box at right.         |
|                                              | Animal Sciences <input type="checkbox"/>                                   |
|                                              | Behavioral & Social Sciences <input type="checkbox"/>                      |
|                                              | Biomedical & Health Sciences <input type="checkbox"/>                      |
|                                              | Cellular/Molecular Biology & Biochemistry <input type="checkbox"/>         |
|                                              | Chemistry <input type="checkbox"/>                                         |
|                                              | Earth & Environmental Sciences <input type="checkbox"/>                    |
|                                              | Engineering <input type="checkbox"/>                                       |
|                                              | Environmental Engineering <input type="checkbox"/>                         |
|                                              | Intelligent Machines, Robotics & Systems Software <input type="checkbox"/> |
|                                              | Mathematics & Computational Sciences <input type="checkbox"/>              |
|                                              | Microbiology <input type="checkbox"/>                                      |
| Physics & Astronomy <input type="checkbox"/> |                                                                            |
| Plant Sciences <input type="checkbox"/>      |                                                                            |

|                                                                                                                                                                                                                                                                                                                                                                                                     |                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| 1. As a part of this research project, the student directly handled, manipulated or interacted with (check ALL that apply):<br><input type="checkbox"/> human subjects <input type="checkbox"/> PHBA (potentially hazardous biological agents)<br><input type="checkbox"/> vertebrate animals <input type="checkbox"/> microorganisms <input type="checkbox"/> rDNA <input type="checkbox"/> tissue |                          |
| 2. This abstract describes only procedures performed by me/us, reflects my/our own independent research, and one year's work only.<br><input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                      |                          |
| 3. I/we worked or used equipment in a regulated research institute or industrial setting <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                   |                          |
| 4. This project is a continuation of previous research <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                     | FOR OFFICIAL<br>USE ONLY |
| 5. The display board includes non-published photographs/visual depiction of humans (other than myself) <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                     |                          |
| 6. All photos on display were taken by: (check ALL that apply) <b>Complete Citation required on display</b><br><input type="checkbox"/> Researcher(s) <input type="checkbox"/> Adult Sponsor(s) <input type="checkbox"/> Parent(s) <input type="checkbox"/> Other <input type="checkbox"/> No Photo                                                                                                 |                          |
| 7. All charts/graphs/illustrations were produced by the researcher(s).<br><input type="checkbox"/> Yes <input type="checkbox"/> No <b>Complete Citation required on display</b>                                                                                                                                                                                                                     |                          |
| <i>I/We hereby certify that the above statements are correct and the information provided in the Abstract is the result of one year's research. I/We also attest that the above properly reflects my/our own work.</i>                                                                                                                                                                              |                          |
| <b>Finalist or Team Leader Signature</b>                                                                                                                                                                                                                                                                                                                                                            | <b>Date</b>              |