

# PROJECT PROPOSAL FORM

This document must be completed by any student, grade 7 through 12, whose project involves (even if only observing) human subjects, invertebrate or non-human vertebrate animals, recombinant DNA, tissues, pathogenic agents, or controlled substances. **This form must be completed, filed, and approved before starting your project and no later than February 1.**

If you have any questions, please contact Erica Hughes, the chairperson of the Scientific Review Committee (SRC), at (510) 525-2744.

When completed, mail this form to:

Erica Hughes, 120 Village Square #66, Orinda, CA 94563

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of School: \_\_\_\_\_

Address of School: \_\_\_\_\_

Home phone #: \_\_\_\_\_ School phone #: \_\_\_\_\_

Where will you conduct your experimentation?

at school: \_\_\_\_\_ at home: \_\_\_\_\_ in the field: \_\_\_\_\_

at a research institution; e.g. university lab, medical center, industrial setting : \_\_\_\_\_  
(If you plan to perform your work at a research institution, you must complete Section 6.)

## 7th, 8th, and 9th GRADERS

Check here \_\_\_\_\_ if you are working with humans and complete sections 1, 7, and 8.

Check here \_\_\_\_\_ if you are working with non-human animals, bacteria, or tissues and complete sections 1, 7, and 8. Read Section 2 before completing Section 1.

## 10th, 11th, and 12th GRADERS

Check here \_\_\_\_\_ if your project involves humans and complete sections 1, 7, and 8.

Check here \_\_\_\_\_ if your project involves non-human vertebrates and complete sections 1, 4, 7, and 8. Read Section 2 before completing Section 1.

Check here \_\_\_\_\_ if your project involves bacteria or invertebrates and complete sections 1, 7, and 8. Read Section 2 before completing Section 1.

Check here \_\_\_\_\_ if your project involves recombinant DNA, pathogenic agents, or controlled substances and complete sections 1, 4, 7, and 8. Read Section 3 before completing Section 1.

Check here \_\_\_\_\_ if your project involves human or animal tissue and complete sections 1, 4, 5, 7, and 8. Read Section 5 before completing Section 1.

page 1 CONTINUE . . .

**SECTION 1:** To be completed by all students filing this proposal form.

a. What is the question and purpose of your study?

b. Describe your experimental procedure with as much detail as possible. Use and attach additional page(s) if necessary. If your study involves a survey of humans, please attach a copy of the survey questions and a copy of the informed consent/waiver form.

**SECTION 2:** To be completed by all students whose projects involve non-human vertebrate or invertebrate animals. In your description for Section 1 question b, please include responses to the following:

- a. Are there any alternatives to the use of live animals in your project? If not, why did you find such alternatives unacceptable for your study? Explain.
- b. Describe in detail how the animals will be used. Identify (where appropriate) the species, strain, sex, age, weight, source, and number of animals proposed for use. Remember to use the MINIMUM number of animals you deem necessary for your study.
- c. Explain the potential impact or contribution this research may have on the broad fields of biology or medicine.
- d. Provide detailed information on the animals' housing and environment. Also, provide information on the veterinary medical/nursing care in the case of illness or emergency; give the name of the veterinarian or veterinary facility.
- e. Explain what will happen to the animal(s) after the project is finished. If euthanasia will be performed by a qualified scientist (students are not permitted to perform euthanasia), describe the method in detail.

page 2 CONTINUE . . .

**SECTION 3:** To be completed by all students whose projects involve recombinant DNA, pathogenic agents, or controlled substances. In your description for Section 1 question b, please include responses to the following:

- a. What is the recombinant DNA, pathogen(s), or controlled substance(s) to be used?
- b. What is the source of your experimental material?

**SECTION 4:** To be completed for all students whose projects involve non-human vertebrate animals, recombinant DNA, tissues, pathogenic agents, or controlled substances by a qualified scientist (someone who possesses an earned doctoral degree in science or medicine or someone with a master's degree with equivalent experience and/or expertise).

" I certify that I have reviewed and approved the research proposal prior to the start of the study, that if the student or supervising teacher is not trained in the necessary procedures I will ensure his/her training, and that I will provide advice and supervision during the research. I hereby accept responsibility for the condition and humane disposition of all living animals used in the project, both during and after its completion. I am a qualified scientist with a working knowledge of the techniques to be used by the student in this research plan."

Name of qualified scientist: \_\_\_\_\_

Address: \_\_\_\_\_

Title or degree: \_\_\_\_\_ Phone number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION 5:** To be completed by all students whose projects involve human or animal tissues. In your description for Section 1 question b, please include responses to the following:

- a. What is the tissue and/or organ to be used?
- b. What is the source of your material?

To be completed by the provider of your tissue when obtained from a non-commercial source:

"Human blood and blood products will be tested and documented free of AIDS and hepatitis B and C antibodies and antigens. Human teeth will be certified free of blood and blood products."

"I certify that the above listed materials will be provided by me and that the student will not be involved in the direct acquisition of the samples provided or purchased."

Provider's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Institution: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Provider's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION 6:** To be completed by all students whose experimentation is carried out in a research facility. In your description for Section 1 question b, please include responses to the following:

- a. Where do you plan to do your experimentation?
- b. How did you get the idea for your project?
- c. Will you work on the project as part of a team or a group?
- d. How independently will you work on the project?

"I certify that I have reviewed and approved the research proposal prior to the start of the study, that if the student is not trained in the necessary procedures I will ensure his/her training, and that I will provide advice and supervision during the research."

Name of supervising scientist: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION 7:** To be completed by the sponsoring teacher of the student filing this form.

"I have read all the rules and regulations of the SFBASF regarding projects involving humans, animals, recombinant DNA, tissues, pathogenic agents, and controlled substances and I have discussed these with the student I am sponsoring. The student has read and understands the SFBASF SRC Guidelines, Requirements, and Rules for student science projects and I will be responsible for this student's compliance with the guidelines. I have collected and kept the signed informed consent/waiver forms for this student's project (if it involves a survey of humans)."

Name of sponsoring teacher: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION 8:** To be completed by all students filing this proposal form.

\_\_\_\_ YES \_\_\_\_ NO Did you read the Guidelines regarding the use of humans, animals, recombinant DNA, tissue, pathogenic agents, or controlled substances in a science fair project?

\_\_\_\_ YES \_\_\_\_ NO Did your sponsoring teacher go over the Guidelines regarding your science fair project with you?

\_\_\_\_ YES \_\_\_\_ NO If your project involved a survey of human subjects, did you give your signed informed consent/waiver forms to your sponsoring teacher?

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **PARENT/GUARDIAN APPROVAL**

"I have read and understand the risks and possible dangers in the sponsoring teacher-approved research plan. I consent to my child participating in this research project."

Parent/Guardian signature: \_\_\_\_\_