

Nebraska Junior Academy of Sciences- Junior Division Project Form

Replaces ISEF Forms 1, 1A, and 1B for Junior Division students only. Senior Division students must complete Forms 1, 1A, and 1B.

Title of Project: _____

Researcher Name(s): 1 _____ 2 _____

School: _____

Teacher/Adult Sponsor Name: _____

I agree to supervise the student researcher while conducting their study and will guide them to ensure both the researcher and any research subjects (human or animal) are kept safe from harm. I attest to the information included on this form and have read and agree to abide by the science fair ethics statement.

Teacher/Adult Sponsor Signature: _____ Date: _____

Acknowledgements Signatures:

Student (Grades 6, 7 or 8 only are permitted to use this form):

- I agree to identify and discuss any possible dangers of my study with both my adult sponsor and parent/guardian to keep myself safe.
- I agree to follow the NJAS Rules and Guidelines and the NJAS Ethics Statement.
- I will submit a research plan (written in future tense) completely explaining the project

Student Researcher Signature(s):

1 _____ 2 _____

Parent/Guardian: I have read and understand the risks and possible dangers involved in the Research Plan. I consent to my child participating in this research. I authorize the NJAS to publish photo and/or video taken of me or the above listed student and our names for use in the NJAS printed publications, website, training, recruiting and media outreach purposes.

Parent/Guardian Signatures (If this is an Individual Project, only one parent/guardian signature is required):

1 _____ Date _____ 2 _____ Date _____

Research Location Where are you conducting your research? (Check One Box)

- School/Home/Field. If checked, move to Risk Management Section
- Local Business- Please include letter from business, acknowledging your project and that you have their permission and supervision during your project
- Medical Facility, University, or other regulated research institution. Complete Form 1C (Institution Setting) and/or Form 2 (Qualified Scientist). Contact Fair Director for advice on any additional paperwork needed

Risk Management

What risks have been identified? (Flames, devices, electricity, chemicals, activities could all be considered as risks)

How have these been managed?

Connection to Previous Research: Is this project a continuation of a previous year's work? (Check One Box)

- Yes, please attach previous year's research plan or abstract and complete Form 7
- No

Use of Human Subjects: (Check One Box)

- This project **DOES NOT** use humans as subjects of research (If checked, move to Vertebrate Animal Section)
- This project **interacts with humans** (i.e., surveys, collecting personalized data). Must complete Forms 3 & 4
- This project **observes** humans as subjects or uses public data about humans for research (needs only the following signatures completed by teacher and school administrator):

I have reviewed this project and it has minimal impact on the research subjects, I have notified parents of those students who may be a part of this study and I approve of this study occurring in our school:

Teacher/Adult Sponsor Signature: _____ Date: _____

School Administrator Signature: _____ Date: _____

Use of Vertebrate Animals: (Check One Box)

- This project **DOES NOT** use vertebrate animals (If checked, move to Vertebrate Tissue Section)
- This project **interacts with vertebrates**. Must complete Form 3 and either Form 5A (study done at home or school) or Form 5B (study done at a research institution)
- This project **observes** vertebrate animals as subjects of research or uses public data about vertebrates (needs only the following signature completed by teacher)

I have reviewed this project and agree to discuss any animal safety concerns with the student researcher(s) and if any issues arise from this study, I am willing to assist.

Teacher/Adult Sponsor Signature: _____ Date: _____

Use of Vertebrate Tissue Section (For example: Blood, saliva, teeth, uncooked meats, eggs) (Check One Box)

- This project **DOES NOT** use any vertebrate tissue (If checked, move to Microorganism Section)
- This project **DOES** use vertebrate animal tissue research. Note: Any human teeth should be autoclaved. Must complete Forms 3 and Form 6B

I have discussed safe handling methods for vertebrate tissues in this study (including proper safety equipment) and will assist as needed:

Teacher/Adult Sponsor Signature: _____ Date: _____

Use of Microorganism Section (For Example: Culturing Bacteria or Viruses) (Check Appropriate Box/Boxes)

- This project **DOES NOT** use any microorganisms as a part of the study
- This project **DOES** use microorganisms as a part of the study. (Check appropriate box below)
 - Microorganism will be swabbed and sealed inside a petri dish. Once sealed it will not be opened. Must complete Forms 3 and 6A
 - E. coli* K12 will be used and may be opened after culture. (Teacher/Sponsor signature required below)
 - Other:: _____ (Contact [NJAS SRC Chair](#) for advice before starting the project)

I will supervise student while culturing microorganisms and students will use approved safe lab practices:

Teacher/Adult Sponsor Signature: _____ Date: _____

- The researcher(s) typed a Research Plan, written in future tense, that is attached with this completed form. Additional registration information and regional entry fee will be submitted by the due date.