## **Checklist for Teacher or Adult Sponsor (9)**

This completed form is required for ALL projects prior to experimentation (NEOSEF Checklist for Adult Sponsor Form 1 and Student Checklist Form 1A will suffice)

To be completed by the Adult Sponsor in collaboration with the student researcher:

Student Name:			School:			
Tit	le of Project:					
		EST Medic	ine Rules a	nd Regulations and a	ssume reasonable	responsibility for the
-,	have reviewed the BEST Medicine Rules and Regulations and assume reasonable responsibility for the student's compliance.					
2)	I have reviewed the student's completed Student Information (1A). I have read/understand the student's research plan and we have discussed the possible risks and dangers to the student researcher prior to experimentation.					
3)	The project involves one or more of the following and requires prior approval by an SRC, IRB, IACUC or IBC:					
	Humans	Potenti	ally Hazardo	ous Biological Agents		
	Vertebrate Animals	Microo	ganisms		rDNA	Tissues
4)	Forms to be completed for ALL Projects: Regulated Research Institutional/Industr Adults Sponsor Checklist (9) Forms (1A-1E)			rial Setting Form (2) (when applicable) Continuation Form (6) (when applicable) Approval Form (1)		
5)	Additional forms required if the project includes the use of one or more of the following (check all					
	that apply): <b>Humans</b> (Requires prior approval by an Institutional Review Board (IRB))					
	Human Subjects Form (1C)					
	Qualified Scientist Form (3) (if applicable and/or required by the IRB)					
	Vertebrate Animals (Requires prior approval)					
	Vertebrate Animal Form (4) - for projects conducted in a non-regulated research site					
	(SRC prior approval required)					
	Vertebrate Animal Form (5) – for projects conducted at a Regulated Research Institution.  Qualified Scientist Form (3) – required for all vertebrate animal projects at a regulated research					
	site or when applicable  Potentially Hazardous Biological Agents (Requires prior approval by SRC, IACUC or IBC).					
	Potentially Hazardous Biological Agents (Requires prior approval by SRC, IACOC of IBC).					
	Human and A	nimal Tiss ne use of f	sue Form (8	en tissue, primary cel	n addition to Form	
	Qualified Scientist Form (3) (when applicable)					
	Risk Assessment Form (11) required for projects involving protists, archae and similar microorganisms and for projects using manure for composting, fuel production or other non-culturing experiments (12, 8 and 3 are not required)					
	Hazardous Chemicals, Activities and Devices (No prior approval required)					
	Risk Assessment Form (11) Qualified Scientist Form (3) (required for projects involving DEA-controlled substances or when					
	Qualified Scie applicable		1 (3) (requii	red for projects invol	ving DEA-controlle	ed substances or when
Adult Sponsor's Printed Name			Signature			ate of Review
Phone			Email			
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Contact: bestmedicine@uakron.edu BEST Medicine Engineer Fair, 2018