

# Required Forms Checklist

School: \_\_\_\_\_

Student Name: \_\_\_\_\_

- INDIVIDUAL Application
- TEAM Application

Return this **checklist along with all required forms** postmarked by **February 10, 2017** to:

Department of Biomedical Engineering  
The University of Akron  
Auburn Science and Engineering Center, West Tower Room 273B  
Akron, OH 44325-0302

Attn: Dr. Carin A. Helfer, BEST Medicine Application

\* **Registrations WILL NOT BE ACCEPTED without ALL REQUIRED, COMPLETED forms**

**NOTE: for pre-selected projects (you MUST have a letter from the Chair). All forms are required.**

**If not pre-selected, the following forms are REQUIRED with every application:**

Required Forms Checklist  
Student Information (Form 1A) **OR** Team Information (Form 13)  
Abstract (Form 1B)  
Human Subjects Form (Form 1C)  
Animal Subjects Form (Form 1D)  
Microorganisms Form (Form 1E)  
Approval Form (Form 1)  
Adult Sponsor Form (Form 9)  
Consent and Release Agreement (Form 10)

**Required if applicable to project:**

Regulated Research Institutional/Industrial Setting Form (Form 2)  
Qualified Scientist Form (Form 3)  
Vertebrate Animal Form (Form 4)  
Vertebrate Animal Form (Form 5)  
Continuation Projects Form (Form 6)  
Human Subject Consent Form (Form 7)  
Human and/or Animal Tissue Form (Form 8)  
Risk Assessment Form (Form 11)  
Potentially Hazardous Biological Agents Risk Assessment Form (Form 12)

Contact: Carin A. Helfer, Ph.D. at 330) 972-6104 or bestmedicine@uakron.edu