Approval Form (1)

(NEOSEF Approval Form 1B will suffice)
(You may need to print this form multiple times for each team member)

To be completed by each Student and Parent

Student Acknowledgement:

- I understand the risks and possible dangers to me in conducting my research.
- I have read the BEST Medicine Rules and Regulations and will adhere to all rules when conducting this research.
- I have read and will abide by the following ethics statement.
 - Scientific fraud and misconduct are not condoned at any level of research or competition. Such practices include plagiarism, forgery, use or presentation of other researcher's work as one's own, and fabrication of data. Fraudulent projects will fail to qualify for competition in affiliated fairs or the BEST Medicine Engineering Fair.
- I certify that I/we were the only student(s) involved in the design and execution of this project.
 Student Printed Name Signature Date
 Parent/Guardian Approval:

 I consent to my child participating in this research and I have understood the risks and possible dangers to my child while conducting his/her research.
 I have consented to my child's participation in this project and in BEST Medicine.
 I am also aware that my child may be photographed by BEST Medicine and/or the news media during the event.

 Parent/Guardian Printed Name Signature Date

If you object to your child being featured in a photograph or by the news media, please initial:

Contact: bestmedicine@uakron.edu BEST Medicine Engineer Fair, 2018