

Permission Slip & Project Safety Assessment Form
This completed form is required for ALL projects and must be completed prior to experimentation.

1. Student Name: _____

2. Title of Project: _____

3. This project **does not** involve the following area(s) and **does not** require teacher approval before experimentation begins:

Human Subjects

Vertebrate Animals (for example mice, fish, hamsters)

Pathogenic Agents*(bacteria, viruses, fungi)

Controlled/Hazardous Substances (includes DEA-controlled substance, prescription drugs, alcohol & tobacco, firearms and explosives, radiation, and lasers).

Recombinant DNA

4. My project is (circle one): Experimental Design or Demonstration Design

5. Description of project and explanation of experiment (including materials you will

use): _____

I have read through the Safety Guidelines and my project will not pose any risk(s) to myself or anyone else.

Student Name: _____

Student Signature: _____

My child has committed to safely completing a Science Project for the Fair and He/she will have adult supervision during experimentation and used materials and equipment safely.

Parent Name: _____

Parent Name: _____

Student Signature: _____

Date: _____