

Guide to Filling in SSEF/ISEF Forms

**For SSEF 2025
(Updated Sept 2024)**

The tips provided in this guide aim to address common issues faced during SSEF/ISEF form-filling.

Click on the buttons/links to navigate through the guide.


All forms can be found on the [SSEF website](#).

For more information on the ISEF rules, please refer to the [ISEF website](#).

Select an SSEF category:



Main Category



Junior Scientist
Category

Main Category

Click to view the
form-filling timeline

Back to
Categories

Click to select a form:

Form			Filled in by	Endorsed by	Dated before or after start of experimentation
No.	Name	Compulsory			
-	SSEF Entry Form	✓	Student(s)	Teacher mentor	After
1	Checklist for Adult Sponsor	✓	Teacher mentor	Teacher mentor	Before
1A	Student Checklist	✓	Student(s)	-	Before
1B	Approval Form	✓	Student(s)	Parent & SRC/IRB	Before
1C	Regulated Research Institutional Setting Form	If applicable	Research mentor	Research mentor	After
2	Qualified Scientist Form	If applicable	Research mentor	Research mentor	Before
3	Risk Assessment Form	If applicable	Student(s)	Research mentor	Before
4	Human Participants Form	If applicable	Student(s)	IRB	Before
5A	Vertebrate Animal Form	If applicable	Student(s)	SRC & research mentor	Before
5B	Vertebrate Animal Form	If applicable	Research mentor	Research mentor	After
6A	Potentially Hazardous Biological Agents Risk Assessment Form	If applicable	Research mentor	SRC & research mentor	Before
6B	Human and Vertebrate Animal Tissue Form	If applicable	Student(s)	Research mentor	Before
7	Continuation/Research Progression Projects Form	If applicable	Student(s)	Student(s)	After

Find out which forms (1C-7) are required by using the [Rules Wizard](#).

FORM-FILLING TIMELINE

First day of experimentation/
data collection
declared on Form 1A

PERIOD OF EXPERIMENTATION/
DATA COLLECTION:
MAXIMUM 365 DAYS

Last day of experimentation/
data collection
declared on Form 1A

Date forms on or before first
day of experimentation/
data collection:

- [1](#)
- [1A](#)
- [1B](#)
- [2](#)
- [3](#)
- [4](#)
- [5A](#)
- [6A](#)
- [6B](#)

Date forms on or after last
day of experimentation/
data collection:

- [1C](#)
- [5B](#)
- [7](#)
- [SSEF Entry Form](#)

For all dates, use MM/DD/YY format

SSEF Entry Form

Compulsory?	Filled in by	Endorsed by
✓	Student(s)	Teacher mentor

Student(s) can complete the form through the following link:

<https://go.gov.sg/ssef2025-registration-mc>

or by scanning the QR code.



Main Category

Back to Main
Category Forms

Back to
Categories

SSEF Entry Form

1. Project Code

Project code format:
XX123, e.g. CH015

2. Project Category

3. Project Sub-Category 1

Note: Your project sub-category should belong to the correct project category as reflected in the SSEF Portal (e.g. if your project code begins with "AS" then the sub-categories chosen should also be from the Animal Sciences (AS) category).

These should be the
same as what was
indicated on the SSEF
Portal.

Refer to the
dropdown list for the
list of categories and
sub-categories.

SSEF Entry Form (continued)

Title of project should be the same as what was indicated on the SSEF Portal.

6. Title of research project

7. Type of Participation

- Individual
- Team (2 members)
- Team (3 members)

Team projects to indicate if all members are from the same school or different schools

8. (For Team Projects only) Are all team members from the same school?

- All members from same school
- Members from different schools

SSEF Entry Form (continued)

Individual or Team Leader

8. Full Name

9. School

10. Level of Study (as of 2024)

This section needs to be filled with participant details for

- **individual** projects,
- **team leader** of team projects



SSEF Entry Form (continued)

Team Member 2

16. [Team Member 2] Full Name

17. [Team Member 2] School

 ▼ ×

18. [Team Member 2] Level of Study (as of 2024)

 ▼ ×

Team Member 3

23. [Team Member 3] Full Name

24. [Team Member 3] School

 ▼ ×

25. [Team Member 3] Level of Study (as of 2024)

 ▼ ×

This section needs to be filled with participant details for

- **Team members 2 and 3** of team projects



This section needs to be acknowledged by parent/guardian for

- **individual** projects,
- **team leader** of team projects

Individual / Team Leader: Parent/Guardian's Consent

12. For the parent/guardian: I agree that in the course of participating in SSEF/ISEF 2025, the following (where applicable) may be shared on MOE and SSEF's social media platforms (e.g. Website, Facebook and Instagram pages) which are accessible to the general public:

All statements need to be acknowledged for form submission.

- Images and videos of my child/ward participating in SSEF/ISEF 2025;
- Materials my child/ward used during participation in SSEF/ISEF 2025;
- My child/ward's learning experience at SSEF/ISEF 2025.

13. Full Name of Parent/Guardian Giving Consent

SSEF Entry Form (continued)

Team Member 2: Parent/Guardian's Consent

19. [For the parent/guardian of Team Member 2] I agree that in the course of participating in SSEF/ISEF 2025, the following (where applicable) may be shared on MOE and SSEF's social media platforms (e.g. Website, Facebook and Instagram pages) which are accessible to the general public:

All statements need to be acknowledged for form submission.

- Images and videos of my child/ward participating in SSEF/ISEF 2025;
- Materials my child/ward used during participation in SSEF/ISEF 2025;
- My child/ward's learning experience at SSEF/ISEF 2025.

20. [Team Member 2] Full Name of Parent/Guardian Giving Consent

Team Member 3: Parent/Guardian's Consent

26. [For the parent/guardian of Team Member 3] I agree that in the course of participating in SSEF/ISEF 2025, the following (where applicable) may be shared on MOE and SSEF's social media platforms (e.g. Website, Facebook and Instagram pages) which are accessible to the general public:

All statements need to be acknowledged for form submission.

- Images and videos of my child/ward participating in SSEF/ISEF 2025;
- Materials my child/ward used during participation in SSEF/ISEF 2025;
- My child/ward's learning experience at SSEF/ISEF 2025.

27. [Team Member 3] Full Name of Parent/Guardian Giving Consent

This section needs to be acknowledged by parent/guardian for

- **Team members 2 and 3** of team projects

This section needs to be endorsed by school for

- **individual** projects,
- **team** projects with members from the **same school**, and
- **team leader** of team projects with members from **different schools**.

Individual / Team Leader: School Endorsement

For:

- individual project;
- team projects with members from the same school;
- team leader of team project with members from different schools

13. Full Name of Teacher-in-charge

14. E-mail Address of Teacher-in-charge

This should be an official work email (e.g. @schools.gov.sg, @moe.edu.sg or a school-issued domain)

SSEF Entry Form (continued)

Team Member 2: School Endorsement

21. [Team Member 2] Full Name of Teacher-in-charge

22. [Team Member 2] E-mail Address of Teacher-in-charge

This should be an official work email (e.g. @schools.gov.sg, @moe.edu.sg or a school-issued domain)

Team Member 3: School Endorsement

28. [Team Member 3] Full Name of Teacher-in-charge

29. [Team Member 3] E-mail Address of Teacher-in-charge

This should be an official work email (e.g. @schools.gov.sg, @moe.edu.sg or a school-issued domain)

This section needs to be endorsed by school for

- **Team members 2 and 3** of team projects with members from **different schools.**

Declaration by participants, teacher coordinator(s) and parent/guardian is required for **all** projects.

Section 3 - Declaration by Participant(s) and Teacher Coordinators

All statements need to be acknowledged for form submission.

15. By submitting this form,

- I / We hereby certify that all information provided to SSEF organisers is correct.
- I / We did not plagiarise material, forge or fabricate data, use or present other researcher's work as our own in my / our research project.
- I / We acknowledge that projects found to have committed fraud or in any degree, been dishonest, at any stage of the project, will face serious disciplinary consequences.
- I / We consent to the use of the information / project I / we submit to the organisers for publicity purpose.
- I / We understand that all the materials I / we submit will not be returned to me / us.
- I / We agree to be contacted for future STEM-related activities or surveys.
- The parent(s)/guardian(s) of all student participants have given consent as reflected in the form above.

Main Category

[Back to Main Category Forms](#)

[Back to Categories](#)

Form 1: Checklist for Adult Sponsor

Compulsory?	Filled in by	Endorsed by	To be dated before or after start of experimentation?
✓	Teacher mentor	Teacher mentor	Before

If project team members are from different schools, this form should be completed by the team leader’s teacher mentor.

*Compulsory items

Checklist for Adult Sponsor (1)

This completed form is required for ALL projects.

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

- * Student’s Name(s): _____
- * Project Title: _____
- * 1. I have reviewed the ISEF Rules and Guidelines, including the science fair ethics statement.
- * 2. I have reviewed the student’s completed Student Checklist (1A) and Research Plan/Project Summary.
- * 3. I have worked with the student and we have discussed the possible risks involved in the project.
- 4. The project involves one or more of the following and requires prior approval by an SRC, IRB, IACUC or IBC:

<input type="checkbox"/> Humans	<input type="checkbox"/> Potentially Hazardous Biological Agents
<input type="checkbox"/> Vertebrate Animals	<input type="checkbox"/> Microorganisms <input type="checkbox"/> rDNA <input type="checkbox"/> Tissues
- * 5. Items to be completed for **ALL PROJECTS**

<input type="checkbox"/> Adult Sponsor Checklist (1)	<input type="checkbox"/> Research Plan/Project Summary
<input type="checkbox"/> Student Checklist (1A)	<input type="checkbox"/> Approval Form (1B)
<input type="checkbox"/> Regulated Research Institutional/Industrial Setting Form (1C) (when applicable; after completed experiment)	
<input type="checkbox"/> Continuation/Research Progression Form (7) (when applicable)	

Form 1: Checklist for Adult Sponsor (continued)

Teacher mentor to check that all relevant forms have been prepared by students.
Find out which forms (1C-7) are required by using the [Rules Wizard](#).

Additional forms required if the project includes the use of one or more of the following (check all that apply):

- Humans**, including student designed inventions/prototypes. (Requires prior approval by an Institutional Review Board (IRB); see full text of the rules.)
 - Human Participants Form (4) or appropriate Institutional IRB documentation
 - Sample of Informed Consent Form (when applicable and/or required by the IRB)
 - Qualified Scientist Form (2) (when applicable and/or required by the IRB)

- Vertebrate Animals** (Requires prior approval, see full text of the rules.)
 - Vertebrate Animal Form (5A) -for projects conducted in a school/home/field research site (SRC prior approval required.)
 - Vertebrate Animal Form (5B) -for projects conducted at a Regulated Research Institution. (Institutional Animal Care and Use Committee (IACUC) approval required prior experimentation.)
 - Qualified Scientist Form (2) (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, see full text of the rules.)
 - Potentially Hazardous Biological Agents Risk Assessment Form (6A)
 - Human and Vertebrate Animal Tissue Form (6B) -to be completed in addition to Form 6A when project involves the use of fresh or frozen tissue, primary cell cultures, blood, blood products and body fluids.
 - Qualified Scientist Form (2) (when applicable)
 - The following are exempt from prior review but require a Risk Assessment Form 3: projects involving protists, archae and similar microorganisms, for projects using manure for composting, fuel production or other non-culturing experiments, projects using color change coliform water test kits, microbial fuel cells, and projects involving decomposing vertebrate organisms.

- Hazardous Chemicals, Activities and Devices** (No SRC prior approval required, see full text of the rules.)
 - Risk Assessment Form (3)
 - Qualified Scientist Form (2) (required for projects involving DEA-controlled substances or when applicable)

- Other**
 - Risk Assessment Form (3)

Form 1: Checklist for Adult Sponsor (continued)

*Compulsory items

* I attest to the information checked above and that I have read and agree to abide by the science fair ethics statement.

* _____
*Adult Sponsor's Printed Name

* _____
*Signature

* _____
*Date of Review (mm/dd/yy)

* _____
*Phone

* _____
*Email

'Date of Review' must be **on/before** the 'Actual Start Date' indicated on [Form 1A](#). Refer to the [form-filling timeline](#) for more information.

Use date format **MM/DD/YY** (e.g. 01/31/24)

Main Category

[Back to Main Category Forms](#)

[Back to Categories](#)

Form 1A: Student Checklist

Compulsory?	Filled in by	Endorsed by	To be dated before or after start of experimentation?
✓	Student(s)	-	Before

All items are compulsory

Student Checklist (1A)

This form is required for ALL projects.

1. a. Student/Team Leader: _____ Grade: _____
Email: _____ Phone: _____

b. Team Member: _____ c. Team Member: _____

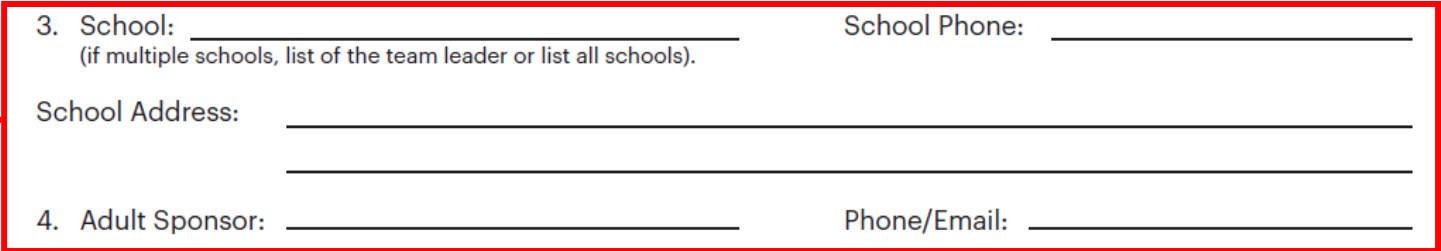
2. Title of Project: _____

3. School: _____ School Phone: _____
(if multiple schools, list of the team leader or list all schools).

School Address: _____

4. Adult Sponsor: _____ Phone/Email: _____

For team projects with members from different schools, these should be based on the school that the **team leader** is from and who his or her teacher mentor is.



Form 1A: Student Checklist (continued)

All items are compulsory

5. Does this project need SRC/IRB/IACUC or other pre-approval? Yes No Tentative start date: _____

'Yes' for projects that involve:

- **humans** (inclusive of the research participants involved in surveys or interviews),
- **vertebrates**, or
- **PHBAs**

Take note that additional forms are required for such projects.

6. Is this a continuation/progression from a previous year? Yes No

If Yes:

- Attach the previous year's Abstract **and** Research Plan/Project Summary
- Explain how this project is new and different from previous years on
 Continuation/Research Progression Form (7)

'Yes' for projects that are a **continuation** from a previous year's project.

Take note that [Form 7](#) is required for such projects.

Form 1A: Student Checklist (continued)

7. This year's experimentation/data collection:

Actual Start Date: (mm/dd/yy)

End Date: (mm/dd/yy)

8. Where will you conduct your experimentation? (check all that apply)

Research Institution School Field Home Other: _____

- Indication of project start and end dates – required for **ALL** projects (including computing-based projects, even if there is no experimentation involved)
- Project must be conducted between 1 Jan 2024 – 14 Jan 2025 but total duration of research done must not exceed 365 days

Actual Start Date	Actual End Date	Eligible?
1 Jan 2024	14 Jan 2025	No
1 Jan 2024	31 Dec 2024	Yes
1 Jan 2024	2 Jan 2025	No
15 Jan 2024	14 Jan 2025	Yes

- 'Actual Start Date' must be **on/after** 'Date of Review' indicated on [Form 1](#). Refer to the [form-filling timeline](#) for more information.
- Use date format **MM/DD/YY** (e.g. 01/31/24)

Form 1A: Student Checklist (continued)

'Other' for projects that used publicly available data

9. Source of Data:
 Collected self/mentor Other Describe/url: _____

Only for projects that are **not** conducted in research institutions

10. List the name and address of all non-home and non-school work site(s), whether you worked there virtually or on-site:

Name _____

Address: _____

Phone/ email _____

Attach your research plan to form 1A

11. **Complete a Research Plan/Project Summary following the Research Plan/Project Summary instructions and attach to this form.**

12. **An abstract is required for all projects after experimentation.**

Main Category

Back to Main Category Forms

Back to Categories

Form 1B: Approval Form

Compulsory?	Filled in by	Endorsed by	To be dated before or after start of experimentation?
✓	Student(s)	Parent and SRC/IRB	Before

One form is required per student, e.g. a team comprising three students should have three copies of Form 1B.

Approval Form (1B)

A completed form is required for each student, including all team members.

1. To Be Completed by Student and Parent

a. Student Acknowledgment:

- I understand the risks and possible dangers to me of the proposed research plan.
- I have read the ISEF Rules and Guidelines and will adhere to all International Rules when conducting this research.
- I have read and will abide by the science fair ethics statement.

Student researchers are expected to maintain the highest standards of honesty and integrity. Scientific fraud and misconduct are not condoned at any level of research or competition. Such practices include but are not limited to 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 and ISEF.

_____ Student's Printed Name	_____ Signature	_____ Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)
b. Parent/Guardian Approval: I have read and understand the risks and possible dangers involved in the Research Plan/Project Summary . I consent to my child participating in this research.		
_____ Parent/Guardian's Printed Name	_____ Signature	_____ Date Acknowledged (mm/dd/yy) (Must be prior to experimentation.)

Item 1 is compulsory

'Date Acknowledged' must be on/before the 'Actual Start Date' indicated on [Form 1A](#). Refer to the [form-filling timeline](#) for more information.

Use date format **MM/DD/YY** (e.g. 01/31/24)

Form 1B: Approval Form (continued)

2. To be completed by the local or affiliated Fair SRC

(Required for projects requiring prior SRC/IRB APPROVAL. Sign 2a or 2b as appropriate.)

- a. Required for projects that need prior SRC/IRB approval **BEFORE** experimentation (humans, vertebrates or potentially hazardous biological agents).

The SRC/IRB has carefully studied this project's **Research Plan/Project Summary** and all the required forms are included. My signature indicates approval of the **Research Plan/Project Summary** before the student begins experimentation.

SRC/IRB Chair's Printed Name

Signature

Date of Approval (mm/dd/yy)
(Must be prior to experimentation.)

OR

- b. Required for research conducted at all Regulated Research Institutions with no prior fair SRC/IRB approval.

This project was conducted at a regulated research institution (**not home or high school, etc.**), was reviewed and approved by the proper institutional board before experimentation and complies with the ISEF Rules. **Attach (1C) and any required institutional approvals (e.g. IACUC, IRB).**

SRC Chair's Printed Name

Signature

Date of Signature (mm/dd/yy)
(May be after experimentation)

- Projects conducted **outside of research institutions** and involve humans, vertebrates, or PHBAs need to complete item 2a. Please contact the SSEF organising committee for assistance if your school does not have its own SRC/IRB.
- 'Date of Approval' must be **on/before** the 'Actual Start Date' indicated on [Form 1A](#). Refer to the [form-filling timeline](#) for more information.
- Use date format **MM/DD/YY** (e.g. 01/31/24)

Projects conducted in research institutions that involve humans, vertebrates, or PHBAs should complete item 2b instead.

Form 1B: Approval Form (continued)

Leave item 3 **blank**. This will be filled up by the SSEF SRC upon receipt of forms.

3. Final ISEF Affiliated Fair SRC Approval(Required for ALL Projects)

SRC Approval After Experimentation and Before Competition at Regional/State/National Fair

I certify that this project adheres to the approved **Research Plan/Project Summary** and complies with all ISEF Rules.

Regional SRC Chair's Printed Name

Signature

Date of Approval (mm/dd/yy)

State/National SRC Chair's Printed Name
(where applicable)

Signature

Date of Approval (mm/dd/yy)

Form 1C: Regulated Research Institutional Setting Form

Compulsory?	Filled in by	Endorsed by	To be dated before or after start of experimentation?
For projects involving *external mentors	Research mentor	Research mentor	After

External mentors* refer to research mentors who are not from the school, e.g. from research institutions, institutes of higher learning. Even if students do not conduct any data collection physically at these external venues, **form 1C will still be required as long as an external mentor is involved in the project consultation (virtually or on site).

Form 1C: Regulated Research Institutional Setting Form

Compulsory?	Filled in by	Endorsed by	To be dated before or after start of experimentation?
For projects involving external mentors	Research mentor	Research mentor	After

*Compulsory items

Revised-Regulated Research Institutional/Industrial Setting Form (1C)

This form must be completed **AFTER** experimentation by the adult supervising the student research either virtually or on site, conducted in a regulated research institution, industrial setting or any work site other than home, school or field.

* Student's Name(s) _____

* Title of Project _____

To be completed by the Supervising Adult in the Setting (NOT the Student(s)) after experimentation:

(Responses must be on the form as it is required to be displayed at student's project booth; please do not print double-sided.)

* Research was supported at my work site:

1. Describe the student experience at your work site (check all that apply):

- | | | |
|---|------------------------------|-----------------------------|
| • Used Equipment | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Minimal interaction with our group | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Mentored by me or someone else from our group | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Worked as a sub-set of our ongoing research | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Had an independent project from our group | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Form 1C: Regulated Research Institutional Setting Form (continued)

*Compulsory items

- * 2. Please describe the independent and/or creative work done by the student in any phase of the project, but particularly in developing the hypotheses or engineering goals of the project

- * 3. Detail the student's role in conducting the research (e.g. data collection, specific procedures performed). Differentiate what the student observed and the student actually did.

- * 4. Did the student(s) work on the project as part of a group? Yes No
Were there other high school students present? If yes, please list the students names and describe how their work was related or different from the work of this project.

- 5. If this project is under a grant and needs to be acknowledged, please list the grant statement here.

Form 1C: Regulated Research Institutional Setting Form (continued)

*All fields are compulsory

I attest that the student has conducted the work as indicated above and that any required review and approval by institutional regulatory board (IRB/IACUC/IBC) has been obtained. Copies are attached if applicable. I further acknowledge that the student will be presenting this work publicly in competition and I have communicated with the student research regarding any requirements for my review and/or restrictions of what is publicized.

Direct Supervisor's Printed Name

Signature

Title

Institution

Date Signed (must be after experimentalion) (mm/dd/yy)

Address

Email/Phone

- 'Date Signed' must be **on/after** the 'Actual End Date' indicated on [Form 1A](#). Refer to the [form-filling timeline](#) for more information.
- Use date format **MM/DD/YY** (e.g. 01/31/24)

Main Category

[Back to Main Category Forms](#)

[Back to Categories](#)

Form 2: Qualified Scientist Form

Compulsory?	Filled in by	Endorsed by	To be dated before or after start of experimentation?
For projects involving human participants, vertebrate animals, PHBAs, and DEA-controlled substances.	Research mentor	Research mentor	Before

All items are compulsory

Qualified Scientist Form (2)
May be required for research involving human participants, vertebrate animals, potentially hazardous biological agents, and hazardous substances and devices. Must be completed and signed before the start of student experimentation.

Student's Name(s) _____

Title of Project _____

To be completed by the Qualified Scientist:

Scientist Name: _____

Educational Background: _____ Degree(s): _____

Experience/Training as relates to the student's area of research:

Position/Institution:

Email/Phone:

To be filled in by the research mentor



Form 2: Qualified Scientist Form (continued)

All items are compulsory

1. Have you reviewed the ISEF rules relevant to this project and the science fair ethics statement relevant to this project? Yes No

2. Will any of the following be used?
 - a. Human participants Yes No
 - b. Vertebrate animals Yes No
 - c. Potentially hazardous biological agents (microorganisms, rDNA and tissues, including blood and blood products) Yes No
 - d. Hazardous substances and devices Yes No

3. Will this study be a sub-set of a larger study? Yes No

4. Will you directly supervise the student? Yes No

Refer to the [Guidelines for Science and Engineering Fairs](#) for full list of PHBAs, exempt studies/tissues and DEA-controlled substances.

Form 2: Qualified Scientist Form (continued)

To be completed by the Qualified Scientist:

I certify that I have reviewed and approved the Research Plan/Project Summary prior to the start of the experimentation. If the student or Direct Supervisor is not trained in the necessary procedures, I will ensure her/his training. I will provide advice and supervision during the research. I have a working knowledge of the techniques to be used by the student in the Research Plan/Project Summary.

Qualified Scientist's Printed Name

Signature

Date of Approval (mm/dd/yy)

To be completed by the Direct Supervisor when the Qualified Scientist cannot directly supervise.

I certify that I have reviewed the Research Plan/Project Summary and have been trained in the techniques to be used by this student, and I will provide direct supervision.

Direct Supervisor's Printed Name

Experience/Training of Designated Supervisor

Signature

Date of Approval (mm/dd/yy)

Phone

email

- To be filled in by the research mentor
- 'Date of Approval' must be **on/before** the 'Actual Start Date' indicated on [Form 1A](#). Refer to the [form-filling timeline](#) for more information.
- Use date format **MM/DD/YY** (e.g. 01/31/24)

- If the research mentor is unable to directly supervise the research process, a Direct Supervisor can be appointed to oversee the student(s). The Direct Supervisor would need to complete this section.
- 'Date of Approval' must be **on/before** the 'Actual Start Date' indicated on [Form 1A](#). Refer to the [form-filling timeline](#) for more information.
- Use date format **MM/DD/YY** (e.g. 01/31/24)

Main Category

[Back to Main Category Forms](#)

[Back to Categories](#)

Form 3: Risk Assessment Form

Compulsory?	Filled in by	Endorsed by	To be dated before or after start of experimentation?
For projects involving Human Participants, Hazardous Chemicals, Materials or Devices or PHBAs	Student(s)	Research mentor	Before

All items are compulsory

Risk Assessment Form (3)
Must be completed before experimentation; recommended for all projects. May be required for projects involving Human Participants, Hazardous Chemicals, Materials or Devices or Potentially Hazardous Biological Agents.

Student's Name(s) _____

Title of Project _____

To be completed by the Student Researcher(s) in collaboration with Designated Supervisor/Qualified Scientist: (All questions must be answered; additional page(s) may be attached.)

1. Identify and assess the risks and hazards involved in this project.
2. a) List all hazardous chemicals, activities or devices to be used; b) identify and list all microorganisms to be used that are exempt from pre-approval (see Potentially Hazardous Biological Agent rules).
3. Describe the safety precautions and procedures that will be used to reduce the risks.
4. Describe the disposal procedures that will be used (when applicable).
5. List the source(s) of safety information.

Form 3: Risk Assessment Form (continued)

All items are compulsory

To be completed and signed by the Direct Supervisor (or Qualified Scientist, when applicable):

I agree with the risk assessment and safety precautions and procedures described above. I certify that I have reviewed the Research Plan/Project Summary and the International Rules, including the science fair ethics statement and will provide direct supervision.

Direct Supervisor's Printed Name

Signature

Date of Review (mm/dd/yy)

Experience/Training as relates to the student's area of research

Position/Institution

Phone or email contact information

- 'Date of Review' must be **on/before** the 'Actual Start Date' indicated on [Form 1A](#). Refer to the [form-filling timeline](#) for more information.
- Use date format **MM/DD/YY** (e.g. 01/31/24)

Main Category

Back to Main Category Forms

Back to Categories

Form 4: Human Participants Form

Compulsory?	Filled in by	Endorsed by	To be dated before or after start of experimentation?
For projects conducted outside of research institutions involving human participants*	Student(s)	IRB	Before

*This includes research participants involved in **surveys or interviews** (regarding potential use or opinions of an invention or a consumer product).

Note that although projects conducted **at research institutions** that involve human participants do not require form 4, **institutional approval forms and IRB approval are still required.**

All items are compulsory

Human Participants Form (4)
 Required for all research involving human participants not at a Regulated Research Institution. If at a Regulated Research Institution, use institutional approval forms for documentation of prior review and approval. (IRB approval required before recruitment or data collection.)

To be filled in by student(s) together with teacher/research mentor

Student's Name(s)	Title of Project
Adult Sponsor	Phone/Email
MUST BE COMPLETED BY STUDENT RESEARCHER(S) IN COLLABORATION WITH THE ADULT SPONSOR/DESIGNATED SUPERVISOR/QUALIFIED SCIENTIST:	
1. <input type="checkbox"/> I have submitted my Research Plan/Project Summary which addresses ALL areas indicated in the Human Participants Section of the Research Plan/Project Summary Instructions.	
2. <input type="checkbox"/> I have attached any surveys or questionnaires I will be using in my project or other documents provided to human participants. <input type="checkbox"/> Any published instrument(s) used was /were legally obtained.	
3. <input type="checkbox"/> I have attached an informed consent that I would use if required by the IRB.	
4. <input type="checkbox"/> Yes <input type="checkbox"/> No Are you working with a Qualified Scientist? If yes, attach the Qualified Scientist Form 2.	

Main Category

Back to Main Category Forms

Back to Categories

Form 4: Human Participants Form (continued)

The following section is to be filled in by an IRB, including one medical/mental health professional, one educator and one school administrator. Please contact the SSEF organising committee for assistance if your school does not have its own IRB.

All items are compulsory

• IRB team cannot consist of individuals with conflict of interest to student (i.e. adult sponsor, direct supervisor, qualified scientist, relative).

• 'Date of Approval' must be on/before the 'Actual Start Date' indicated on [Form 1A](#). Refer to the [form-filling timeline](#) for more information.

• Use date format **MM/DD/YY** (e.g. 01/31/24)

BELOW – IRB USE ONLY

MUST be completed by Institutional Review Board (IRB) after review of the research plan. All questions must be answered for the approval to be valid. (If not approved, return paperwork to the student with instructions for modifications.)

Approved with Full Committee Review (3 signatures required) and the following conditions: **(All 6 must be answered)**

1. Risk Level (check one) : Minimal Risk More than Minimal Risk (a risk assessment form 3 is required).

2. Qualified Scientist (QS) Required (Form 2): Yes No

3. Risk Assessment Required (Form 3): Yes No

4. Written Minor Assent required for minor participants:
 Yes No Not applicable (No minors in this study)

5. Written Parental Permission required for minor participants:
 Yes No Not applicable (No minors in this study)

6. Written Informed Consent required for participants 18 years or older:
 Yes No Not applicable (No participants 18 yrs or older in this study)

IRB SIGNATURES (All 3 signatures required) None of these individuals may be the adult sponsor, direct supervisor, qualified scientist or related to (e.g., mother, father of) the student (conflict of interest).

I attest that I have reviewed the student's project, that the checkboxes above have been completed to indicate the IRB determination and that I agree with the decisions above.

Medical or Mental Health Professional (a psychologist, medical doctor, licensed social worker, licensed clinical professional counselor, physician's assistant, doctor of pharmacy, or registered nurse) with expertise related to this project.

Printed Name	Degree/Professional License
Signature/Date (prior to experimentation)	Email

Educator

Printed Name	Degree/Professional License
Signature/Date (prior to experimentation)	Email

School Administrator

Printed Name	Degree/Professional License
Signature/Date (prior to experimentation)	Email

Form 4: Human Participants Form – Human Informed Consent Form

The Human Informed Consent Form is used to provide information to the research participant regarding the project and to document consent or parental permission. Research participants involved in surveys or interviews are also required to complete this form.

Human Informed Consent Form

Instructions to the Student Researcher(s): An informed consent/assent/permission form should be developed in consultation with the Adult Sponsor, Direct Supervisor or Qualified Scientist. This form is used to provide information to the research participant (or parent/guardian) and to document written informed consent, minor assent, and/or parental permission.

- When written documentation is required, the researcher keeps the original, signed form.
- Students may use this sample form or may copy ALL elements of it into a new document.

If the form is serving to document parental permission, a copy of any survey or questionnaire must be attached.

Student Researcher(s): _____

Title of Project: _____

I am asking for your voluntary participation in my science fair project. Please read the following information about the project. If you would like to participate, please sign in the appropriate area below.

Purpose of the project:

If you participate, you will be asked to:

Time required for participation:

Potential Risks of Study:

Benefits:

How confidentiality will be maintained:

If you have any questions about this study, feel free to contact:

Adult Sponsor/QS/DS: _____ Phone/email: _____

All items are compulsory

This section is to be filled in by student(s) together with teacher/research mentor.

After filling in this section, the consent form can be photocopied for all research participants to complete.

Form 4: Human Participants Form – Human Informed Consent Form (continued)

This section of the consent form is to be completed by research participants (including those involved in surveys or interviews).

Completed consent forms do not need to be submitted but they should all be kept by students for documentation purposes.

Voluntary Participation:

Participation in this study is completely voluntary. If you decide not to participate there will not be negative consequences. Please be aware that if you decide to participate, you may stop participating at any time and you may decide not to answer any specific question.

By signing this form I am attesting that I have read and understand the information above and I freely give my consent/ assent to participate or permission for my child to participate.

Adult Informed Consent or Minor Assent
(mm/dd/yy)

Date Reviewed & Signed: _____

Research Participant Printed Name:

Signature:

Parental/Guardian Permission (if applicable)

Date Reviewed & Signed: _____
(mm/dd/yy)

Parent/Guardian Printed Name:

Signature:

Main Category

Back to Main
Category Forms

Back to
Categories

Form 5A: Vertebrate Animal Form

Compulsory?	Filled in by	Endorsed by	To be dated before or after start of experimentation?
For projects conducted outside of research institutions involving vertebrate animals	Student(s)	SRC and research mentor	Before

Note: For projects conducted at research institutions that involve vertebrate animals, refer to [Form 5B](#).

All items are compulsory

Vertebrate Animal Form (5A)
Required for all research involving vertebrate animals that is conducted in a school/home/field research site.
(SRC approval required before experimentation.)

Student's Name(s) _____

Title of Project _____

To be completed by Student Researcher:

1. Common name (or Genus, species) and number of animals used.
2. Describe completely the housing and husbandry to be provided. Include the cage/pen size, number of animals per cage, environment, bedding, type of food, frequency of food and water, how often animal is observed, etc. Add an additional page as necessary.
3. What will happen to the animals after experimentation?
4. Attach a copy of wildlife licenses or approval forms, as applicable
5. The ISEF Vertebrate Animal Rules require that any death, illness or unexpected weight loss be investigated and documented by a letter from the qualified scientist, designated supervisor or a veterinarian. If applicable, attach this letter with this form when submitting your paperwork to the SRC prior to competition.

To be filled in by
student(s)

Form 5A: Vertebrate Animal Form (continued)

This section is to be filled in an SRC to determine if a direct supervisor and/or certification by a veterinarian would be required. Please contact the SSEF organising committee for assistance if your school does not have its own SRC.

<p>To be completed by Local or Affiliate Fair Scientific Review Committee (SRC) BEFORE experimentation.</p> <p>Level of Supervision Required for agricultural, behavioral or nutritional studies (select one):</p> <ul style="list-style-type: none"><input type="checkbox"/> Direct Supervisor REQUIRED. Please have applicable person sign below.<input type="checkbox"/> Veterinarian and Direct Supervisor REQUIRED. Please have applicable persons sign below.<input type="checkbox"/> Veterinarian, Direct Supervisor and Qualified Scientist REQUIRED. Please have applicable persons sign below and have the Qualified Scientist complete Form (2). <p>The SRC has carefully reviewed this study and finds it is an appropriate study that may be conducted in a non-regulated research site.</p> <p>Local or Affiliate Fair SRC Pre-Approval Signature:</p> <table border="0" style="width: 100%;"><tr><td style="width: 33%; border-top: 1px solid black;">_____</td><td style="width: 33%; border-top: 1px solid black;">_____</td><td style="width: 33%; border-top: 1px solid black;">_____</td></tr><tr><td>SRC Chair Printed Name</td><td>Signature</td><td>Date of Approval (must be prior to experimentation) (mm/dd/yy)</td></tr></table>			_____	_____	_____	SRC Chair Printed Name	Signature	Date of Approval (must be prior to experimentation) (mm/dd/yy)									
_____	_____	_____															
SRC Chair Printed Name	Signature	Date of Approval (must be prior to experimentation) (mm/dd/yy)															
<p>To be completed by Veterinarian:</p> <ul style="list-style-type: none"><input type="checkbox"/> I have reviewed this research and animal husbandry with the student before the start of experimentation.<input type="checkbox"/> I have approved the use and dosages of prescription drugs and/or nutritional supplements.<input type="checkbox"/> I will provide veterinary medical and nursing care in case of illness or emergency. (Fees may apply.) <table border="0" style="width: 100%;"><tr><td style="width: 50%; border-top: 1px solid black;">_____</td><td style="width: 50%; border-top: 1px solid black;">_____</td></tr><tr><td>Printed Name</td><td>Email/Phone</td></tr><tr><td style="border-top: 1px solid black;">_____</td><td style="border-top: 1px solid black;">_____</td></tr><tr><td>Signature</td><td>Date of Approval (mm/dd/yy)</td></tr></table>	_____	_____	Printed Name	Email/Phone	_____	_____	Signature	Date of Approval (mm/dd/yy)	<p>To be completed by Direct Supervisor or Qualified Scientist when applicable:</p> <ul style="list-style-type: none"><input type="checkbox"/> I have reviewed this research and animal husbandry with the student before the start of experimentation and I accept primary responsibility for the care and handling of the animals in this project.<input type="checkbox"/> I will directly supervise the experiment. <table border="0" style="width: 100%;"><tr><td style="width: 50%; border-top: 1px solid black;">_____</td><td style="width: 50%; border-top: 1px solid black;">_____</td></tr><tr><td>Printed Name</td><td>Email/Phone</td></tr><tr><td style="border-top: 1px solid black;">_____</td><td style="border-top: 1px solid black;">_____</td></tr><tr><td>Signature</td><td>Date of Approval (mm/dd/yy)</td></tr></table>	_____	_____	Printed Name	Email/Phone	_____	_____	Signature	Date of Approval (mm/dd/yy)
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Signature	Date of Approval (mm/dd/yy)																

Form 5A: Vertebrate Animal Form (continued)

Certification by a veterinarian is required if the project involves any of the following:

- animal husbandry
- supplemental nutrition, administration of prescription drugs and/or activities that would not be ordinarily encountered in the animal's daily life
- 'Date of Approval' must be **on/before** the 'Actual Start Date' indicated on [Form 1A](#). Refer to the [form-filling timeline](#) for more information.
- Use date format **MM/DD/YY** (e.g. 01/31/24)

To be completed by Local or Affiliate Fair Scientific Review Committee (SRC) BEFORE experimentation.

Level of Supervision Required for agricultural, behavioral or nutritional studies (select one):

- Direct Supervisor REQUIRED. Please have applicable person sign below.
- Veterinarian and Direct Supervisor REQUIRED. Please have applicable persons sign below.
- Veterinarian, Direct Supervisor and Qualified Scientist REQUIRED. Please have applicable persons sign below and have the Qualified Scientist complete Form (2).

The SRC has carefully reviewed this study and finds it is an appropriate study that may be conducted in a non-regulated research site.

Local or Affiliate Fair SRC Pre-Approval Signature:

_____ SRC Chair Printed Name	_____ Signature	_____ Date of Approval (must be prior to experimentation) (mm/dd/yy)
---------------------------------	--------------------	---

To be completed by Veterinarian:		To be completed by Direct Supervisor or Qualified Scientist when applicable:	
<input type="checkbox"/> I have reviewed this research and animal husbandry with the student before the start of experimentation.	<input type="checkbox"/> I have reviewed this research and animal husbandry with the student before the start of experimentation and I accept primary responsibility for the care and handling of the animals in this project.		
<input type="checkbox"/> I have approved the use and dosages of prescription drugs and/or nutritional supplements.	<input type="checkbox"/> I will directly supervise the experiment.		
<input type="checkbox"/> I will provide veterinary medical and nursing care in case of illness or emergency. (Fees may apply.)			
_____ Printed Name	_____ Email/Phone	_____ Printed Name	_____ Email/Phone
_____ Signature	_____ Date of Approval (mm/dd/yy)	_____ Signature	_____ Date of Approval (mm/dd/yy)

The research mentor (or direct supervisor) is required to directly supervise all research involving vertebrate animals, except for observational studies.

- 'Date of Approval' must be **on/before** the 'Actual Start Date' indicated on [Form 1A](#). Refer to the [form-filling timeline](#) for more information.
- Use date format **MM/DD/YY** (e.g. 01/31/24)

Main Category

[Back to Main Category Forms](#)

[Back to Categories](#)

Form 5B: Vertebrate Animal Form

Compulsory?	Filled in by	Endorsed by	To be dated before or after start of experimentation?
For projects conducted at research institutions involving vertebrate animals	Research mentor	Research mentor	After

Note: For projects conducted outside of research institutions that involve vertebrate animals, refer to [Form 5A](#).

All items are compulsory

Vertebrate Animal Form (5B)
Required for all research involving vertebrate animals that is conducted in at a Regulated Research Institution. (IACUC approval required before experimentation. Form must be completed and signed after experimentation.)

Student's Name(s) _____

Title of Project _____

Title and Protocol Number of IACUC Approved Project _____

To be completed by Qualified Scientist or Principal Investigator:

1. Species of animals used: _____ Number of animals used: _____

2. Describe, in detail, the role of the student in this project: animal procedures and related equipment that were involved, oversight provided and safety precautions employed. (Attach extra pages if necessary.)

3. Was there any weight loss or death of any animal? If yes, attach a letter obtained from the qualified scientist, designated supervisor or a veterinarian documenting the situation and the results of the investigation.

4. Did the student's project also involve the use of tissues?
 No
 Yes; complete Forms 6A and 6B

5. What laboratory training, including dates, was provided to the student?

Form 5B: Vertebrate Animal Form (continued)

Note that a copy of **IACUC Approval** from the research institution is required to be attached.

6. Attach a copy of the Regulated Research Institution IACUC Approval. A letter from the Qualified Scientist or Principal Investigator is not sufficient.

Qualified Scientist/Principal Investigator	
Printed Name	
Signature	Date (mm/dd/yy)

- 'Date' must be **on/before** the 'Actual Start Date' indicated on [Form 1A](#). Refer to the [form-filling timeline](#) for more information.
- Use date format **MM/DD/YY** (e.g. 01/31/24)

Form 6A: Potentially Hazardous Biological Agents Risk Assessment Form

Compulsory?	Filled in by	Endorsed by	To be dated before or after start of experimentation?
For projects involving PHBAs*	Research mentor	SRC and research mentor	Before

*PHBAs include:

- potentially hazardous microorganisms (e.g. bacteria, viruses, viroids, rickettsia, fungi, parasites),
- recombinant DNA (rDNA),
- fresh/frozen tissue (including primary cell lines, human and other primate established cell lines and tissue cultures),
- blood and
- body fluids.

Projects involving these PHBAs need to submit **both Forms 6A and 6B**.

Refer to the [Guidelines for Science and Engineering Fairs](#) for exempt studies/tissues.

Form 6A: Potentially Hazardous Biological Agents Risk Assessment Form (continued)

Sections 1 and 2 should be completed by the research mentor, in collaboration with the student(s).

All items are compulsory

Potentially Hazardous Biological Agents Risk Assessment Form (6A)

Required for research involving microorganisms, rDNA, fresh/frozen tissue (including primary cell lines, human and other primate established cell lines and tissue cultures), blood, blood products and body fluids.
SRC/IACUC/IBC approval required before experimentation.

Student's Name(s) _____

Title of Project _____

To be completed by the **QUALIFIED SCIENTIST/DIRECT SUPERVISOR** in collaboration with the student researcher(s).
All questions are applicable and must be answered; additional page(s) may be attached.

SECTION 1: PROJECT ASSESSMENT

1. Identify potentially hazardous biological agents to be used in this experiment. Include the strain, source, quantity and the biosafety level risk group of each microorganism.
2. Describe the site of experimentation including the level of biological containment.
3. Describe the procedures that will be used to minimize risk (personal protective equipment, hood type, etc.).
4. What final biosafety level do you recommend for this project given the risk assessment you conducted?
5. Describe the method of disposal of all cultured materials and other potentially hazardous biological agents. If BSL-2 laboratory, include the BSL-2 checklist.

SECTION 2: TRAINING

1. What training will the student receive for this project?
2. Experience/training of Direct Supervisor as it relates to the student's area of research (if applicable).

Form 6A: Potentially Hazardous Biological Agents Risk Assessment Form (continued)

All items are compulsory

Section 3 is to be filled in by the research mentor

- 'Date of review' must be **on/before** the 'Actual Start Date' indicated on [Form 1A](#). Refer to the [form-filling timeline](#) for more information.
- Use date format **MM/DD/YY** (e.g. 01/31/24)

SECTION 3: For ALL CELL LINES, MICROORGANISMS AND TISSUES - To be completed by the QUALIFIED SCIENTIST or Direct Supervisor - Check the appropriate box(es) below:

- Experimentation on the microorganisms/cell lines/tissues to be used in this study will NOT be conducted at a Regulated Research Institution, but will be conducted at a (check one) BSL-1 or BSL-2 laboratory (include a copy of the checklist for BSL-2). [This study has been reviewed by the local SRC and the procedures have been approved prior to experimentation.]
- Experimentation on the microorganisms/cell lines/tissues to be used in this study will be conducted at a Regulated Research Institution and was approved by the appropriate institutional board prior to experimentation; institutional approval forms are attached.
Origin of cell lines: _____ Date of IACUC/IBC approval _____
- Experimentation on the microorganisms/cell lines/tissues to be used in this study will be conducted at a Regulated Research Institution, which does not require pre-approval for this type of study. The SRC has seen and approved the research plan and supporting documentation and acknowledges the accuracy of the responses above.

CERTIFICATION - To be SIGNED by the QUALIFIED SCIENTIST or Direct Supervisor

The QS/DS has seen this project's research plan and supporting documentation and acknowledges the accuracy of the information provided above. This study has been approved as a (check one) BSL-1/ BSL-2 study, and will be conducted in an appropriate laboratory.

QS/DS Printed Name

Signature

Date of review (mm/dd/yy)

SECTION 4: CERTIFICATION - To be completed by the LOCAL or AFFILIATED FAIR SRC

The SRC has seen this project's research plan and supporting documentation and acknowledges the accuracy of the information provided.

SRC Printed Name

Signature

Date of review (mm/dd/yy)

This section is to be filled in the an SRC. Please contact the SSEF organising committee for assistance if your school does not have its own SRC.

- 'Date of review' must be **on/before** the 'Actual Start Date' indicated on [Form 1A](#). Refer to the [form-filling timeline](#) for more information.
- Use date format **MM/DD/YY** (e.g. 01/31/24)

Form 6B: Human and Vertebrate Animal Tissue Form

Compulsory?	Filled in by	Endorsed by	To be dated before or after start of experimentation?
For projects involving fresh/frozen tissue, blood, blood products and body fluids	Student(s)	Research mentor	Before

Projects that require Form 6B would also require [Form 6A](#).

All items are compulsory

Human and Vertebrate Animal Tissue Form (6B)

Required for research involving fresh/frozen tissue (including primary cell lines, human and other primate established cell lines and tissue cultures), blood, blood products and body fluids. If the research involves living organisms please ensure that the proper human or animal forms are completed. All projects using any tissue listed above must also complete Form 6A.

Student's Name(s) _____

Title of Project _____

To be completed by Student Researcher(s):

- What vertebrate animal tissue will be used in this study? Check all that apply.
 - Fresh or frozen tissue sample
 - Fresh organ or other body part
 - Blood
 - Body fluids
 - Primary cell/tissue cultures
 - Human or other primate established cell lines
- Where will the above tissue(s) be obtained? If using an established cell line include source and catalog number.
- If the tissue will be obtained from a vertebrate animal study conducted at a research institution attach a copy of the IACUC certification with the name of the research institution, the title of the study, the IACUC approval number and a of IACUC approval.

Form 6B: Human and Vertebrate Animal Tissue Form (continued)

This section should be completed by the research mentor.

To be completed by the Qualified Scientist or Direct Supervisor:

I verify that the student will work solely with de-identified organs, tissues, cultures or cells that will be supplied to him/her by myself or qualified personnel from the laboratory; and that if vertebrate animals were euthanized they were euthanized for a purpose other than the student's research.

AND/OR

I certify that the blood, blood products, tissues or body fluids in this project will be handled in accordance with the standards and guidance set forth in U.S. Occupational Safety and Health Act, 29CFR, Subpart Z, 1910.1030 - Blood Borne Pathogens.

Printed Name _____ Signature _____

Date of Approval (mm/dd/yy)
(Must be prior to experimentation.)

Title _____ Phone/Email _____

Institution _____

- 'Date of Approval' must be **on/before** the 'Actual Start Date' indicated on [Form 1A](#). Refer to the [form-filling timeline](#) for more information.
- Use date format **MM/DD/YY** (e.g. 01/31/24)

Main Category

[Back to Main Category Forms](#)

[Back to Categories](#)

Form 7: Continuation/Research Progression Projects Form

Compulsory?	Filled in by	Endorsed by	To be dated before or after start of experimentation?
For projects that are a continuation/progression in the same field of study as a previous project	Student(s)	Student(s)	After

All items are compulsory

Continuation/Research Progression Projects Form (7)

Required for projects that are a continuation/progression in the same field of study as a previous project. This form must be accompanied by the previous year's abstract and Research Plan/Project Summary.

Student's Name(s) _____

To be completed by Student Researcher: List all components of the current project that make it new and different from previous research. The information must be on the form; use an additional form for previous year and earlier projects.

Components	Current Research Project	Previous Research Project: Year: _____
1. Title		
2. Change in goal/purpose/objective		
3. Changes in methodology		
4. Variable studied		
5. Additional changes		

Form 7: Continuation/Research Progression Projects Form (continued)

All items are compulsory

Abstract and Research Plan/Project Summary of the previous project are required to be attached.

Attached are:

Abstract and Research Plan/Project Summary, Year _____

I hereby certify that the above information is correct and that the current year Abstract & Certification and project display board properly reflect work done only in the current year.

Student's Printed Name(s)

Signature

Date of Signature (mm/dd/yy)

- 'Date of Signature' must be **on/after** the 'Actual End Date' indicated on [Form 1A](#). Refer to the [form-filling timeline](#) for more information.
- Use date format **MM/DD/YY** (e.g. 01/31/24)

Junior Scientist Category

[Back to Categories](#)

Click to select a form:

Form	Compulsory
SSEF Entry Form (Junior Scientist)	✓

Junior Scientist Category

[Back to Junior Scientist Category Forms](#)

[Back to Categories](#)

SSEF Entry Form (Junior Scientist)

Compulsory?	Filled in by	Endorsed by
✓	Student(s)	Teacher mentor

Student(s) can complete the form through the following link:

<https://go.gov.sg/ssef2025-registration-js>

or by scanning the QR code.



Junior Scientist Category

[Back to Junior Scientist Category Forms](#)

[Back to Categories](#)

SSEF Entry Form (Junior Scientist)

1. Project Code

Project code format:
JXX123, e.g. JCH015

2. Project Category

3. Title of research project

These should be the same as what was indicated on the SSEF Portal.

Junior Scientist Category

[Back to Junior Scientist Category Forms](#)

[Back to Categories](#)

SSEF Entry Form (Junior Scientist) (continued)

4. Type of Participation

- Individual
- Team (2 members)
- Team (3 members)

Team projects to indicate if all members are from the same school or different schools

5. (For Team Projects only) Are all team members from the same school?

- All members from same school
- Members from different schools

SSEF Entry Form (Junior Scientist) (continued)

This section needs to be acknowledged by parent/guardian for

- **individual** projects,
- **team leader** of team projects.

Individual / Team Leader: Parent/Guardian's Consent

In participating in the SSEF Junior Scientist Category, your child/ward will be submitting a video for the video contest. Please review the rules of the video contest at <https://science.edu.sg/ssef/>.

9. For the parent/guardian: I agree that in the course of participating in SSEF 2025, the following (where applicable) may be shared on MOE and SSEF's social media platforms (e.g. Website, Facebook and Instagram pages) which are accessible to the general public:

All statements need to be acknowledged for form submission.

- Images and videos of my child/ward participating in SSEF 2025;
- Materials my child/ward used during participation in SSEF 2025;
- My child/ward's learning experience at SSEF 2025.

10. Full Name of Parent/Guardian Giving Consent

SSEF Entry Form (Junior Scientist) (continued)

Team Member 2: Parent/Guardian's Consent

In participating in the SSEF Junior Scientist Category, your child/ward will be submitting a video for the video contest. Please review the rules of the video contest at <https://science.edu.sg/ssef/>.

16. [For the parent/guardian of Team Member 2] I agree that in the course of participating in SSEF 2025, the following (where applicable) may be shared on MOE and SSEF's social media platforms (e.g. Website, Facebook and Instagram pages) which are accessible to the general public:
All statements need to be acknowledged for form submission.

- Images and videos of my child/ward participating in SSEF 2025;
- Materials my child/ward used during participation in SSEF 2025;
- My child/ward's learning experience at SSEF 2025.

17. [Team Member 2] Full Name of Parent/Guardian Giving Consent

Team Member 3: Parent/Guardian's Consent

In participating in the SSEF Junior Scientist Category, your child/ward will be submitting a video for the video contest. Please review the rules of the video contest at <https://science.edu.sg/ssef/>.

23. [For the parent/guardian of Team Member 3] I agree that in the course of participating in SSEF 2025, the following (where applicable) may be shared on MOE and SSEF's social media platforms (e.g. Website, Facebook and Instagram pages) which are accessible to the general public:
All statements need to be acknowledged for form submission.

- Images and videos of my child/ward participating in SSEF 2025;
- Materials my child/ward used during participation in SSEF 2025;
- My child/ward's learning experience at SSEF 2025.

24. [Team Member 3] Full Name of Parent/Guardian Giving Consent

This section needs to be acknowledged by parent/guardian for

- **Team members 2 and 3** of team projects.

SSEF Entry Form (Junior Scientist) (continued)

This section needs to be filled for

- **individual** projects,
- **team** projects with members from the **same school**, and
- **team leader** of team projects with members from **different schools**.

Individual / Team Leader: School Endorsement

For:

- individual project;
- team projects with members from the same school;
- team leader of team project with members from different schools

10. Full Name of Teacher-in-charge

11. E-mail Address of Teacher-in-charge

This should be an official work email (e.g. @schools.gov.sg, @moe.edu.sg or a school-issued domain)

SSEF Entry Form (Junior Scientist) (continued)

Team Member 2: School Endorsement

18. [Team Member 2] Full Name of Teacher-in-charge

19. [Team Member 2] E-mail Address of Teacher-in-charge

This should be an official work email (e.g. @schools.gov.sg, @moe.edu.sg or a school-issued domain)

Team Member 3: School Endorsement

25. [Team Member 3] Full Name of Teacher-in-charge

26. [Team Member 3] E-mail Address of Teacher-in-charge

This should be an official work email (e.g. @schools.gov.sg, @moe.edu.sg or a school-issued domain)

This section needs to be filled for

- **Team members 2 and 3** of team projects with members from **different schools.**

SSEF Entry Form (Junior Scientist) (continued)

Section 3 - Declaration by Participant(s) and Teacher Coordinators

All statements need to be acknowledged for form submission.

27. By submitting this form,

- I / We hereby certify that all information provided to SSEF organisers is correct.
- I / We did not plagiarise material, forge or fabricate data, use or present other researcher's work as our own in my / our research project.
- I / We acknowledge that projects found to have committed fraud or in any degree, been dishonest, at any stage of the project, will face serious disciplinary consequences.
- I / We consent to the use of the information / project I / we submit to the organisers for publicity purpose.
- I / We understand that all the materials I / we submit will not be returned to me / us.
- I / We agree to be contacted for future STEM-related activities or surveys.
- The parent(s)/guardian(s) of all student participants have given consent as reflected in the form above.

Declaration by participants, teacher coordinator(s) and parent/guardian is required.