

## EXPERIMENTAL BIOLOGICAL PROJECTS INFORMATION FORM

The following steps must be taken before the student begins the biological project:

1. The student(s) must complete the form and submit it to the project supervisor (teacher) and parent for approval.
2. The project supervisor reviews the project and determines if any potential physical, psychological, or social risk is involved. If the project is deemed safe, the supervisor signs this form and the student(s) may begin the project. If any question of abuse, harm, or inappropriate procedure exists, the student must redesign the experiment and submit a revised project for approval.

**Please complete both pages of this form and return it to:  
WNY Science Congress, P.O. Box 225, Cheektowaga, NY 14225**

Student(s) Name \_\_\_\_\_ Grade \_\_\_\_\_

Title of Project/Lecture \_\_\_\_\_

School \_\_\_\_\_ Project Supervisor \_\_\_\_\_

*Attach as a separate document, if more space is needed:*

Purpose of Project \_\_\_\_\_

Procedures \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Location where procedures will take place \_\_\_\_\_

Starting date \_\_\_\_\_ Approximate ending date \_\_\_\_\_

Kind of living organism to be used (i.e. cat, earthworms, bacteria, mold, human subject...)

If experiment is fungi or bacteria, please provide the common name or species \_\_\_\_\_

Source from which fungi or bacterium was obtained \_\_\_\_\_

Number of subjects to be used \_\_\_\_\_

Will any vertebrate be used in this experiment?       Yes       No

Will the subject be harmed or injured in any way?       Yes       No

*If yes, please explain. (You may NOT perform experiments that injure or harm any healthy, living vertebrate—that includes dissection or other procedure that could be considered as cruel. No experiments that injure or cruelly destroy invertebrates are allowed.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will the subjective live in a  petri dish  cage  aquarium  container  
 Other (Please explain)\_\_\_\_\_

Dimensions of the housing space: Length\_\_\_\_\_width\_\_\_\_\_height\_\_\_\_\_

Describe the subject: Height/size\_\_\_\_\_Weight\_\_\_\_\_

Type of bedding: \_\_\_\_\_ Temperature range of habitat: (F or C)\_\_\_\_\_

Type of food/water:\_\_\_\_\_ Frequency of feeding:\_\_\_\_\_

Frequency of habitat cleaning:\_\_\_\_\_ Frequency of human contact:\_\_\_\_\_

Other:\_\_\_\_\_

If you plan to use anesthetics, drugs, thermal procedures, physical stress, organisms harmful to humans or other vertebrate, radiation, carcinogens, or surgical procedures describe why and how the intervention will be used and controlled. If electric current, LASER beams, sound stimuli, or other artificial stimuli are used, the intervention must not exceed the normal tissue tolerances for the species. Fully describe the methods and techniques that will be used.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ NA=none apply

After the experiment, where will the subject live or be returned to?\_\_\_\_\_

Describe potential benefits that may be gained by using the subject in this project.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If the subject(s) is to be destroyed when finished, (i.e. fungi or bacteria), how will they be destroyed and properly disposed?

\_\_\_\_\_  
\_\_\_\_\_

**APPROVAL:** We take the responsibility to treat and respect all living subjects used in this project. We agree that the purpose of the project and the use of the living subjects follow all local, state, and federal guidelines and, if necessary, these guidelines have been obtained, read and understood. We acknowledge that the proper procedures were followed to ensure the safe use, as well as the safety of the subject in this project.

*Signatures:*

Student(s)\_\_\_\_\_ Date\_\_\_\_\_

Parent/Guardian\_\_\_\_\_ Date\_\_\_\_\_

Project Supervisor\_\_\_\_\_ Date\_\_\_\_\_