



## REQUEST FOR HUMAN OR VERTEBRATE TISSUE ENDORSEMENT

**BEFORE** beginning any project using of human and vertebrate tissue in an experiment, students must obtain permission from the Scientific Review Committee and in some cases, from ISEF. Details about rules regarding the use of vertebrate tissue are on page 16 of the current Science Fair Handbook.

**THESE RULES WILL BE STRICTLY ENFORCED FOR THE REGIONAL (NETWORK), CITY AND STATE SCIENCE EXPOSITIONS. NO REGIONAL (NETWORK) FAIR SHALL SEND A PROJECT TO THE CITY OR STATE EXPOSITION THAT DOES NOT MEET THESE REGULATIONS.**

1. For the purpose of student research, all body fluids (blood, saliva, & urine), bone, skin, hair, and teeth are considered tissue.
2. Students may do research on fresh tissue, organs, primary cell cultures, established cell and tissue cultures, eggs, meat or meat by-products including bone obtained from biological supply houses, food stores, restaurants, or packing houses.
3. Teeth used in a research project must be sterilized. A written statement from a dentist to this effect must accompany this request.
4. The only blood that may be used is that which is purchased or obtained from a blood bank, hospital, or laboratory. No blood may be drawn by or from any person specifically for a Science Fair project.
5. All tissue should be handled as though it were potentially infectious.
6. All tissue studies must be conducted under adult supervision.

**EXCEPTION** - Projects conducted under the supervision of a professor or scientist at a university, hospital or research facility must submit endorsements prior to beginning – **must be received by October 15, 2016.**

**SPECIAL NOTE:** Students in grades 9-12 wishing to participate at the International Science and Engineering Fair should consult pages 41-42 of this handbook for required forms. ISEF rules and forms are available at: [http://www.societyforscience.org/isef/about/rules\\_regulations.asp](http://www.societyforscience.org/isef/about/rules_regulations.asp).

Name of Student: \_\_\_\_\_ Student E-mail Address: \_\_\_\_\_

Student School ID number (8 digits):         Print Name of Teacher-Sponsor \_\_\_\_\_

Teacher-Sponsor E-mail Address: \_\_\_\_\_

School: \_\_\_\_\_ GSR# \_\_\_\_\_ Date submitted: \_\_\_\_\_

**If the proposed experiment or project is being conducted under the supervision of a professor or scientist at a university, hospital or research facility the following information must be submitted with this endorsement request on separate institution letter head. Due by October 15, 2016.**

**1. Consultant's contact information:**

Name of consulting professional: \_\_\_\_\_

\_\_\_\_\_ Title: \_\_\_\_\_

Profession \_\_\_\_\_ Position and name of Institution \_\_\_\_\_

Phone number (extension if applicable): ( ) \_\_\_\_\_ E-mail address: \_\_\_\_\_

**2. A signed original letter on institute stationery that specifically describes the student's procedure and how the student will be supervised by the consultant throughout the experiment. The letter must also include the following statement indicating the consulting adult certifies he/she will provide necessary supervision.**

**PLEASE INCLUDE THE FOLLOWING STATEMENT IN THE LETTER**

"By signing this document I certify that I will directly supervise this student and take necessary precautions to prevent risk and exposure to potentially infectious materials involved in this project."

**Additionally, please have the consultant indicate in the letter which of the following options apply to this project.**

- a. This project was reviewed and approved by an Institutional Biosafety Committee (IBC) before experimentation or is part of an approved ongoing study. A copy of the approval is on file at the institution and will be made available if necessary.
- b. This institution does not require approval for this type of study. The student has received proper training in the safe use and proper methods of disposal of the potentially hazardous biological agents involved in this project.

**TWO COPIES OF THIS COMPLETED FORM MUST BE RECEIVED BY November 15, 2016 BY: JENNIFER PATUSH, CURIE HIGH SCHOOL, GSR #37**

**(NO FAXES ACCEPTED)**

**Alternately, this endorsement request may be completed on-line at [www.cssf.org](http://www.cssf.org); and may be saved, printed, signed, scanned and sent to [humvertissue8@gmail.com](mailto:humvertissue8@gmail.com).**

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Students and sponsors using vertebrate tissue in a science project must complete this form. The signature of the student(s) and the sponsor indicate the project was done within the rules on the previous page. Failure to comply with these rules will mean disqualification of the project. This form must follow the Safety Sheet in the project research paper.

Title of Project: \_\_\_\_\_

Tissue/Organ to be used: \_\_\_\_\_

Complete the following information to show source where the tissue/organ will be obtained:

IF OBTAINED FROM A SUPPLY HOUSE	IF OBTAINED FROM A UNIVERSITY, HOSPITAL, OR RESEARCH LAB
NAME OF SUPPLY HOUSE	NAME OF INSTITUTION
ITEM CATALOG NUMBER	NAME OF PROVIDER OF TISSUE
SUPPLY HOUSE WEBSITE	TITLE/PROFESSION
SUPPLY HOUSE PHONE	E-MAIL ADDRESS
	PHONE
	SIGNATURE OF PROVIDER

Read and answer each of the following questions carefully so the Scientific Review Committee can fairly assess whether your project will be safe. **DO NOT** copy and attach the procedure from your research plan as a substitute.

Hypothesis or problem to be studied (include independent and dependent variables):

Site of experimentation: \_\_\_\_\_

Describe briefly the experimental procedure:

Describe disposal method of all potentially hazardous materials:

Describe the safety precautions that all participants will follow while conducting this experiment in order to minimize potential exposure or harm (i.e. gloves, safety goggles, and lab coat will be worn at all times, all equipment will be sterilized using an autoclave, etc.) See p. 15-16 for details before filling out

**The signatures of the sponsor and the student or students below indicate that the project conforms to the above rules of CPS Student Science Fair and of the Illinois Junior Academy of Science.**

Sponsor Signature: \_\_\_\_\_ Sponsor Email address: \_\_\_\_\_

Student 1 Signature: \_\_\_\_\_ Student Email address: \_\_\_\_\_

Student 2 Signature: \_\_\_\_\_ Student Email address: \_\_\_\_\_

Date: \_\_\_\_\_

<b>FOR SRC USE ONLY</b>	The signature and stamp in blue ink indicate this project has been approved as safe.	SRC Stamp:
	Scientific Review Committee Member:	
	Date of approval:	

**SIGNATURE AND STAMP FROM THE SRC MUST BE ON THIS ENDORSEMENT BEFORE THIS PROJECT CAN BE EXHIBITED. THIS ENDORSEMENT MUST BE TYPED AND DISPLAYED ON THE FRONT OF THE EXHIBITOR'S DISPLAY BOARD. IT MAY BE REDUCED TO A HALF SHEET OF PAPER IF NECESSARY (PRINT AT 65% REDUCTION).**

CHECK BOX IF EXCEPTION/APPROVAL LETTER IS REQUIRED AND ATTACHED (SEE PAGE 14)