

SCIENTIFIC REVIEW COMMITTEE (SRC) CHECKLIST

FORMS NEEDED FOR ALL PROJECTS

School Review		ABSTRACT	SRC Review	
Present or NA	Error or Missing	REQUIRED for All Projects Draft Acceptable	Present or NA	Error or Missing
		Title & Name		
		School Name, City, State		
		Body (Contains Purpose, Procedure, data, conclusion)		
		Category box checked		
		1. 2.		
		3. Other site? <input type="checkbox"/> Yes <input type="checkbox"/> No		
		4. Is it a continuation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
		Written in 3 rd person past tense		

School Review		FORM 1	SRC Review	
Present or NA	Error or Missing	REQUIRED for All Projects Checklist for Adult Sponsor	Present or NA	Error or Missing
		Student Name & Title		
		1. 2. 3.		
		4.If need, checked		
		5. Must check first four boxes		
		6. If needed, checked		
		Sponsor name & signature		
		Date (Prior to start date)		
		Sponsor Phone & Email		

School Review		FORM 1A	SRC Review	
Present or NA	Error or Missing	REQUIRED for All Projects Student Checklist	Present or NA	Error or Missing
		1. Name, grade, email (or put N/A) & phone (or put N/A)		
		Is it? <input type="checkbox"/> Individual <input type="checkbox"/> Team		
		2.		
		3. Complete address		
		4. Name & phone with area code		
		5. Is it a continuation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
		6. Start/end dates consistent		
		7. Work sites Checked		
		8. Sites contain name, city, state, zip and phone.		

School Review		RESEARCH PLAN	SRC Review	
Present or NA	Error or Missing	REQUIRED for All Projects Plan of how research will be done. Prior to start.	Present or NA	Error or Missing
		A. Question being addressed		
		B. Hypothesis / Problem		
		C. Method/Procedures		
		Plan leaves out Data/Conclusions		
		Plan for Data Analysis		
		Includes safety for all projects /1-4 as needed		
		D. Bibliography		
		Standard Format/ 5 major sources		

School Review		FORM 1B	SRC Review	
Present or NA	Error or Missing	REQUIRED for All Projects Permission	Present or NA	Error or Missing
		# of 1B Forms?		
		If team, 1B for each team member		
		1a. Student Name, Signature, Date (prior to start date)		
		1b. Parent Name, Signature, Date (prior to start date)		
		Dates consistent w/ Form 1A		
		2a or 2b If Needed (Projects containing humans, vertebrate, or potentially hazardous biological agents have SRC/IRB: Name, Signature, Date prior to start date)		

School Review		MEDIA RELEASE	SRC Review	
Present or NA	Error or Missing	REQUIRED for All Projects	Present or NA	Error or Missing
		# of Media Releases?		
		Signed Media Release for each participant		

FORM NEEDED FOR ONLY SOME PROJECTS

School Review		FORM 1C	SRC Review	
Present or NA	Error or Missing	ONLY For projects done at regulated research institutions/industrial setting	Present or NA	Error or Missing
		Name & Title		
		a or b 1 2		
		3 4 5		
		Signature with complete information.		

School Reviewer: _____

SRC Reviewer: _____

Rio Grande Valley Regional Science and Engineering Fair
SCIENTIFIC REVIEW COMMITTEE (SRC) CHECKLIST

Student Name: _____

FORMS NEEDED FOR SOME PROJECTS (Use Form 1 as guide to know which supplemental forms are needed, leave blank if not needed)

School Review		FORM 2	SRC Review	
Present or NA	Error or Missing	ONLY FOR projects needing a qualified scientist	Present or NA	Error or Missing
		Name & Title		
		Scientist Name, Background, Positions, Address & Email		
		1 2 3 4		
		Does the Qualified Scientist have a Masters degree or higher? <input type="checkbox"/> Yes <input type="checkbox"/> No		
		Signature with complete information. Signed prior to start date.		

School Review		FORM 3	SRC Review	
Present or NA	Error or Missing	ONLY FOR projects using hazardous chemicals, activities or devices	Present or NA	Error or Missing
		Title & Name		
		1. 2. 3.		
		4. 5.		
		Signature with complete information. Signed prior to start date.		
		MSDS or other supplemental info attached if needed		

School Review		FORM 4	SRC Review	
Present or NA	Error or Missing	ONLY FOR projects that using human subjects	Present or NA	Error or Missing
		Name, Title, & Sponsor		
		1. 2. 3. 4.		
		Sponsor Name, Email Phone		
		IRB Box checked with appropriate risk level		
		IRB Signatures: Medical Professional / Administrator / Teacher Complete		
		Informed Consent / Questionnaire Attached		

School Review		FORM 5A	SRC Review	
Present or NA	Error or Missing	ONLY FOR projects using vertebrate animals at non-regulated research site.	Present or NA	Error or Missing
		Name & Title		
		1.		
		2. 3.		
		Level of Supervision checked		
		SRC Chair: Name, Signature, Date		
		Name, Signature, Email, Date of <input type="checkbox"/> Vet <input type="checkbox"/> Supervisor		

School Review		FORM 5B	SRC Review	
Present or NA	Error or Missing	ONLY FOR projects using vertebrate animals at a regulated research institution.	Present or NA	Error or Missing
		Name & Title		
		IACUC Title and Protocol Number		
		1 2 3 4		
		5 6 7 8		
		Student Training		
		Signatures QS/PI		
		Signature of IACUC Chair		

School Review		FORM 6A	SRC Review	
Present or NA	Error or Missing	ONLY FOR projects using Potentially Hazardous Biological Agents	Present or NA	Error or Missing
		Title & Name		
		1. 2. 3.		
		4. 5.		
		QS/DS 1. 2.		
		QS/DS Name, Signature, Date and Exp.		
		SRC chair must be registered with RGVRFSE SRC		

School Review		FORM 6B	SRC Review	
Present or NA	Error or Missing	ONLY FOR projects using Human and Vertebrate Animal Tissue	Present or NA	Error or Missing
		Name & Title		
		1. 2.		
		3.		
		QS/DS Boxes Checked		
		QS/DS Name, Signature, Date, Title, Phone and Inst.		

School Review		FORM 7	SRC Review	
Present or NA	Error or Missing	ONLY FOR CONTINUATION PROJECTS	Present or NA	Error or Missing
		Name & Title		
		1 2 3 4 5		
		Shows significant change		
		Previous abstract & research plan attached		
		Student name, signature & date		