

# Qualified Scientist/Mentor Form (2) – Middle School

This form **MAY BE** required for projects involving human subjects, vertebrate animals and/or potentially biological agents and **MUST** be completed **PRIOR** to experimentation.

**This form is to be completed by the Qualified Scientist or Mentor who is advising and/or supervising the Student Researcher(s) on the project and has expertise in the area of research. The Student Researcher(s) should NOT complete any part of this form!**

1. Student's Name(s): \_\_\_\_\_
2. Project Title: \_\_\_\_\_  
\_\_\_\_\_
3. Scientist/Mentor's Name: \_\_\_\_\_
4. Degree(s)/Certification(s): \_\_\_\_\_ Field(s) of Study: \_\_\_\_\_
5. My *experience/training* as it relates to the Student Researcher(s)' project includes:
6. Institution: \_\_\_\_\_ Position: \_\_\_\_\_
7. Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_
8. I \_\_\_\_\_ *have* / \_\_\_\_\_ *have not* reviewed the Rules and Guidelines for Middle School Science Research relevant to the student's project.
9. The following will be used as part of this research project (check ALL that apply)
  - Human Subjects
  - DEA-controlled Substances
  - Vertebrate Animals
  - Tissues (including blood and blood products)
  - Microorganisms
  - rDNA
  - None of the Above
10. This research \_\_\_\_\_ *is* / \_\_\_\_\_ *is not* a subset of a larger study.
11. I \_\_\_\_\_ *will* / \_\_\_\_\_ *will not* directly supervise the Student Researcher(s) during experimentation.
  - a. If not, who will **DIRECTLY** supervise the Student Researcher(s)? \_\_\_\_\_
  - b. The *experience/training* of the Designated Supervisor as it relates to the project includes:

## Qualified Scientist/Mentor

I certify that I have reviewed and approved the Research Plan **PRIOR** to the start of experimentation. I will ensure that the Student Researcher(s) and/or Designated Supervisor(s) are trained in the necessary procedures related to the project. I will provide advice and supervision during the research. I have a working knowledge of the techniques to be used by the Student Researcher(s) as outlined in the Research Plan. I understand that a Designated Supervisor is required when I am not available to directly supervise the Student Researcher(s).

\_\_\_\_\_  
Scientist/Mentor's Printed Name

\_\_\_\_\_  
Scientist/Mentor's Signature

\_\_\_\_\_  
Date of Approval

## Designated Supervisor

*To be used only when the Qualified Scientist/Mentor is unavailable to directly supervise the student(s).*  
I certify that I have reviewed the Research Plan and have been trained in the techniques to be used by the Student Researcher(s) and I will provide **DIRECT** supervision during experimentation.

\_\_\_\_\_  
Designated Supervisor's Printed Name

\_\_\_\_\_  
Designated Supervisor's Signature

\_\_\_\_\_  
Date of Approval

\_\_\_\_\_  
Email