

## REQUEST FOR RECOMBINANT DNA ENDORSEMENT

**BEFORE** beginning any project that involves cutting and splicing segments of DNA that would not normally occur together, students must obtain the approval of the Scientific Review Committee and in some cases, from IJAS. Details about rules regarding the use of recombinant DNA and Biosafety level 1 are on pages 15-17 of the current STEM Exhibition Handbook.

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

1. All research involving recombinant DNA techniques must meet the requirements of the National Institute of Health Guidelines for Research Involving Recombinant DNA Molecules.
2. All studies must be conducted in a registered research laboratory under the guidance of a biomedical scientist approved to conduct such studies by an appropriately constituted and registered bio-safety committee.
3. The research project being investigated must have the approval of a biomedical scientist or the laboratory's IBC where necessary
4. Propagation of recombinants containing DNA coding for oncogenes or other human, plant or animal toxins (including viruses) are prohibited.

**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/Page.aspx?pid=312>

Does this project involve the cutting and splicing of DNA segments that would not normally occur together?  YES  NO

If **YES**, you need an endorsement in order to participate in the CPS Science Fair. **Endorsement is due October 12, 2017.**

If **NO**, your project does not involve recombinant DNA. You don't need an endorsement before beginning your experiment.

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: \_\_\_\_\_

**All Recombinant DNA experiments must be 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 12, 2017.**

**1. Biomedical Scientist'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 BY November 17, 2017 BY: JENNIFER PATUSH, CURIE HIGH SCHOOL, GSR #37. IF SENDING VIA GSR SEND NOTIFICATION TO EMAIL BELOW. A CONFIRMATION EMAIL WILL BE SENT WHEN RECEIVED (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 and scanned to [recombdna8@gmail.com](mailto:recombdna8@gmail.com).**

(Continued on following page)

## PAGE 2 of REQUEST FOR RECOMBINANT DNA ENDORSEMENT

Students and sponsors using recombinant DNA 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 at the city level. This form must follow the Safety Sheet in the project research paper

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

### THE INFORMATION BELOW MUST BE COMPLETED BY THE ADULT WHO WILL BE SUPERVISING THE STUDENT'S PROJECT

*Please attach additional pages if necessary*

1. Hypothesis or problem to be investigated (include independent and dependent variables): \_\_\_\_\_

\_\_\_\_\_

2. Briefly describe the experimental procedure for the student's project: \_\_\_\_\_

\_\_\_\_\_

3. Identify ANY potentially hazardous biological agents that will be used in this experiment (Examples: rDNA, bacteria, viruses, etc. and their sources)

\_\_\_\_\_

4. Describe how all cultured materials and potentially hazardous waste will be properly disposed of and/or sterilized:

\_\_\_\_\_

5. Describe the safety precautions that all participants will follow while conducting this experiment in order to minimize potential exposure or harm (Examples: gloves, safety goggles, and lab coat will be worn at all times, all equipment will be sterilized using an autoclave, etc.): \_\_\_\_\_

\_\_\_\_\_

Name of supervising adult: \_\_\_\_\_ Signature of supervising adult: \_\_\_\_\_

**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. DISPLAYED ENDORSEMENT CAN NOT BE SMALLER THAN 8.5 INCHES (VERTICAL) X 5.5 INCHES (HORIZONTAL). (PRINT AT 65% REDUCTION)**

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

SAVE

PRINT