

SUPERVISING SCIENTIST FORM

A-C is to be filled in by the student then given to the Supervising Scientist with a stamped self-addressed envelope. Indicate the date you must have this returned to you to meet any group submission deadlines for your school.

A. Name of Student _____

B. Title of Project _____

C. Category _____

Information below is to be filled in by the supervising scientist. If additional space is needed, please use the back of the form.

1. How did the student get the idea for his/her research? Was the project assigned, was it picked from a list of possible research topics, did it come out of discussion with a scientist, did it arise from some work in which the student was engaged or did the student suggest it?

2. Did the student work on the project as part of a team or a group? If so, how big was the team, what kind of team was it (student, group of adult researchers, etc.) and what was the student's role on the team?

3. How independently did the student work on the project? What parts did the student do on his/her own, and on which parts did he/she receive help (in the experimental design, choice of techniques, use of special instruments or equipment, construction of equipment, gathering data, evaluation of data, arriving at conclusions, etc.)?

4. What did the student do that showed creativity and ingenuity? Do you know of any examples? If so, were they creative in terms of science, or what is more likely, creative for a high school student? Was it in experimental design, construction or use of equipment, evaluation of data, etc.?

5. What was the intensity of the program? Number of weeks, full time vs. part time, resident vs. nonresident, etc.

6. Has the student received a salary or other compensation for doing his/her research?

7. Other comments.

Supervising Scientist: please fill in information below, then copy the form for your records and put the original into the stamped, self-addressed envelope the student provided, seal it, SIGN across the seal and mail by the student's deadline.

Name of Supervising Scientist _____ Signature of Supervising Scientist _____

Title _____ Telephone Number/email address _____

Institution _____ Date _____