**Project Code:** 

## SINGAPORE SCIENCE & ENGINEERING FAIR (JUNIOR SCIENTIST CATEGORY) ENTRY FORM

Please refer to the SSEF website (<u>http://www.science.edu.sg/ssef</u>) for details on the application process and all the submission requirements.

All forms must be received by the stipulated deadline for submission of forms in each year.

PROJECT INFORMATION	
Type of Participation:	Project Category*:
🗆 Individual	
🗆 Team	
Title of Research Project:	

\*The <u>five</u> project categories for the Junior Scientist Category are: Biology, Chemistry, Computing, Mathematics, and Physics. Selecting the appropriate project category is important to ensure that the assigned judges are familiar with your research topic.

DECLARATION BY PARTICIPANT(S)§				
I / We hereby certify that all the information provided to SSEF organisers is correct. I / We did not plagiarise material, forge or fabricate data, use or present other researcher's work as our own in my / our research project. I / We consent to the use of the information / project I / we submit to the organisers for publicity purpose. I / We understand that all the materials I / we submit will not be returned to me / us.				
Individual / Team Leader (i.e. team mem	ber 1)			
Full name:		School Level (e.g. Sec 1, IP1)		
Signature:	School:	Date:		
For Team Projects:				
Team Member 2				
Full name:		School Level (e.g. Sec 1, IP1)		
Signature:	School:	Date:		
Team Member 3				
Full name:		School Level (e.g. Sec 1, IP1)		
Signature:	School:	Date:		

<sup>&</sup>lt;sup>§</sup> Note that participant(s) of SSEF may be contacted through e-mail for future STEM-related activities or surveys.

SCHOOL'S ENDORSEMENT For individual project / team projects with members from the <u>same</u> school					
Teacher-in-charge's full name:	Teacher-in-charge's email address:				
Teacher-in-charge's signature:	Date:				

SCHOOL'S ENDORSEMENT For team projects with members from <u>different</u> schools					
For team member 1					
Teacher-in-charge's full name:	Teacher-in-charge's email ac	ddress:			
Teacher-in-charge's signature:		Date:			
For team member 2					
Teacher-in-charge's full name:	Teacher-in-charge's email address:				
Teacher-in-charge's signature:		Date:			
For team member 3					
Teacher-in-charge's full name:	Teacher-in-charge's email address:				
Teacher-in-charge's signature:		Date:			

## **SSEF JUNIOR SCIENTIST CATEGORY** PARENT/GUARDIAN CONSENT FORM (INDIVIDUAL/TEAM MEMBER 1) FOR SSEF

In participating in the SSEF Junior Scientist Category, your child/ward will be submitting a video for the video contest. Please review the rules of the video contest at <u>https://science.edu.sg/ssef/</u>.

The following may also be shared on MOE and SSEF's social media platforms (Website, Facebook and Instagram pages) which are accessible to the general public:

- 1. Images and videos of my child/ward\* participating in SSEF, if applicable;
- 2. Materials my child/ward\* used during participation in SSEF, if applicable;
- 3. My child/ward\*'s learning experience at SSEF, if applicable.

If you agree to your child / ward participating in the SSEF and to the rules of the Junior Scientist Category, please fill in the blanks and sign below.

I, \_\_\_\_\_\_ (name of parent / guardian), acknowledge that I have read and understood the information above and the rules of the Junior Scientist Category.

I hereby give permission for any image or video of my child / ward, \_\_\_\_\_\_, (name of child / ward) captured during SSEF, if applicable, to be used for the activities listed above.

I declare that I have the authority to sign this release and that I have read and understood this agreement prior to signing it.

PARENT'S/GUARDIAN'S SIGNATURE:

Date:

## **SSEF JUNIOR SCIENTIST CATEGORY** PARENT/GUARDIAN CONSENT FORM (TEAM MEMBER 2) FOR SSEF

In participating in the SSEF Junior Scientist Category, your child/ward will be submitting a video for the video contest. Please review the rules of the video contest at <u>https://science.edu.sg/ssef/</u>.

The following may also be shared on MOE and SSEF's social media platforms (Website, Facebook and Instagram pages) which are accessible to the general public:

- 1. Images and videos of my child/ward\* participating in SSEF, if applicable;
- 2. Materials my child/ward\* used during participation in SSEF, if applicable;
- 3. My child/ward\*'s learning experience at SSEF, if applicable.

If you agree to your child / ward participating in the SSEF and to the rules of the Junior Scientist Category, please fill in the blanks and sign below.

I, \_\_\_\_\_\_ (name of parent / guardian), acknowledge that I have read and understood the information above and the rules of the Junior Scientist Category.

I hereby give permission for any image or video of my child / ward, \_\_\_\_\_\_, (name of child / ward) captured during SSEF, if applicable, to be used for the activities listed above.

I declare that I have the authority to sign this release and that I have read and understood this agreement prior to signing it.

PARENT'S/GUARDIAN'S SIGNATURE:

Date:

## **SSEF JUNIOR SCIENTIST CATEGORY** PARENT/GUARDIAN CONSENT FORM (TEAM MEMBER 3) FOR SSEF

In participating in the SSEF Junior Scientist Category, your child/ward will be submitting a video for the video contest. Please review the rules of the video contest at <u>https://science.edu.sg/ssef/</u>.

The following may also be shared on MOE and SSEF's social media platforms (Website, Facebook and Instagram pages) which are accessible to the general public:

- 1. Images and videos of my child/ward\* participating in SSEF, if applicable;
- 2. Materials my child/ward\* used during participation in SSEF, if applicable;
- 3. My child/ward\*'s learning experience at SSEF, if applicable.

If you agree to your child / ward participating in the SSEF and to the rules of the Junior Scientist Category, please fill in the blanks and sign below.

I, \_\_\_\_\_\_ (name of parent / guardian), acknowledge that I have read and understood the information above and the rules of the Junior Scientist Category.

I hereby give permission for any image or video of my child / ward, \_\_\_\_\_\_, (name of child / ward) captured during SSEF, if applicable, to be used for the activities listed above.

I declare that I have the authority to sign this release and that I have read and understood this agreement prior to signing it.

PARENT'S/GUARDIAN'S SIGNATURE:

Date: