

LSSI CERTIFICATION AND CONSENT FORM

APPLICANT NAME: _____

This must be scanned and uploaded into the online application when prompted to do so.

STUDENT CERTIFICATION/CONSENT (Please initial next to each item):

____ This certifies that the information I have entered on this form is complete and accurate.

____ I acknowledge that I will treat as confidential all information that I may read or hear, directly or indirectly. If accepted for the LSSI High School Student Research Program, I agree to conform to the rules and regulations of the Institute. I understand that I will be required to attend and participate in training specific to my assignment. I acknowledge that either the Institute or I may discontinue my status at any time and for any reason.

____ If selected to participate I agree to submit to any additional documents that may be required based on grant funding.

____ If accepted for the LSSI High School Student Research Program, I will attend the program in its entirety, from June 18-August 10, 2018 (full-time Monday-Friday).

I certify that this application packet is complete:

APPLICANT NAME

APPLICANT SIGNATURE

DATE

PARENTAL PERMISSION AND CONSENT (Please initial next to each item):

(If applicant is under the age of 18 at time of application)

PARENT(S)/GUARDIAN(S) NAME:

MOBILE: _____

OTHER: _____

EMAIL: _____

Initialed by Parent/Guardian:

____ This certifies that I approve this application and that the applicant has my consent to participate if selected.

____ I understand that my son/daughter may be working with hazardous chemicals, radioactive materials and biological materials. Student interns will be provided training in the safe handling of these items.

____ I understand that if my son/daughter is selected to participate I agree to submit any additional documents that may be required based on grant funding.

____ I understand that the LSSI High School Student Research Program runs from June 18-August 10, 2018 and my son/daughter will be required to attend the program in its entirety.

PARENT/GUARDIAN NAME

PARENT/GUARDIAN SIGNATURE

DATE