



Student Name:

The question I plan to investigate in my experiment (please phrase as a question):

| Science Project Question Checklist | | Yes / No |
|------------------------------------|--|----------------------|
| | Your teacher may put some restrictions on projects. Have you met your teacher's requirements? | Yes / No |
| | Le the topic interesting enough to read about, then work off for the next couper set | Yes / No |
| 3. 4. | Can you find at least 3 sources of written information on the subject? Can you measure changes to the important factors (variables) using a number that represents a quantity such as a count, percentage, length, width, weight, voltage, velocity, energy, time, etc.? Or, just as good, are you measuring a factor (variable) that is simply present or not present? For example, Lights ON in one trial, then lights OFF in another trial | Yes / No |
| 5. | • USE fertilizer in one trial, then DON'T USE fertilizer Can you design a "fair test" to answer your question? In other words, can you change only one factor (variable) at a time, and control other factors that might influence your experiment, so that they do not interfere? | Yes / No Yes / No |
| 6 | C to manfamm? | 103/110 |
| 6. 7. | Do you have all the materials and equipment you need for your project, or will you of the | Yes / No |
| | | Yes / No |
| 8. 9. | If you are planning to enter a science fair outside of your school: Does your project meet all the rules and requirements for the science fair? | Yes / No |
| | Have you checked to see if your science fair project will require approval from the fair before you begin experimentation? | Yes / No |

I have discussed the project idea and the checklist with my parent(s) and I am willing to commit to following through on this project.

Student Signature

I have discussed the project idea and the checklist with my student and I believe he or she can follow through with this project. I agree to supervise the safety of the project steps that my student performs at home.

Parent Signature

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Date

Date