

Teptu Brink - Parent & Science Teacher Consent Form

Student Information

First Name _____ M.I. ____ Last Name _____

Address _____ Apt # _____

City _____ State ____ Zip _____ Cell # (____) _____

E-mail _____ Date of Birth (mm/dd/yy) ____ / ____ / ____

Sex ____M ____F

Race/Ethnicity: (for statistical purposes only- optional)

Are you Hispanic/Latino? ____ Yes ____ No

____Black or African American ____ Asian ____ White

____ Native Hawaiian or Pacific Islander ____ American Indian or Alaska Native

Project Title: _____

Category (Refer to the Guideline PDF, to see which Category your project falls under): _____

School Information

School Name _____

School Address: _____ City: _____ Zip: _____

Acknowledgment of Participation:

a. Student and Parent/Guardian Acknowledgment: We have read the rules to participate in the Teptu Brink S.T.E.M Research Competition and we agree to follow all the rules and guidelines as stated in the Teptu Brink Rules & Guidelines. We understand that failure to comply with the rules will result in immediate disqualification. We understand that images, photographs and/or videos may be taken or produced, and give permission to Teptu to use them for non-commercial purposes for the promotion of Teptu Brink. We also understand that all Finalists will be invited to present in the finals round in New York City.

_____	_____	_____	_____	_____	_____
Student Name	Signature	Date	Parent/Guardian Name	Signature	Date

b. Science Teacher or Research Mentor Approval: I agree to sponsor this student for the Teptu Brink S.T.E.M Research Competition, and to review the student's research project application. Furthermore, I also agree that my student's project is not plagiarized nor fabricated in any way.

_____	_____	_____
Name & Title	Signature	Date