

**2005 Scientific Review Committee and Institutional Review Board Members Register  
DUE: November 1, 2004**

School/District Name: \_\_\_\_\_

The SRC and IRB members listed below will provide science and engineering project assistance for the following schools/district:

\_\_\_\_\_

**SRC**

1. Chairperson: \_\_\_\_\_ Field of Study: \_\_\_\_\_  
Degree(s) and/or Qualification: \_\_\_\_\_  
Institutional Affiliation: \_\_\_\_\_ Phone \_\_\_\_\_  
Complete Mailing Address: \_\_\_\_\_  
Street City Zip

2. Name: \_\_\_\_\_ Field of Study: \_\_\_\_\_  
Degree(s) and/or Qualification: \_\_\_\_\_  
Institutional Affiliation: \_\_\_\_\_ Phone \_\_\_\_\_  
Complete Mailing Address: \_\_\_\_\_  
Street City Zip

3. Name: \_\_\_\_\_ Field of Study: \_\_\_\_\_  
Degree(s) and/or Qualification: \_\_\_\_\_  
Institutional Affiliation: \_\_\_\_\_ Phone \_\_\_\_\_  
Complete Mailing Address: \_\_\_\_\_  
Street City Zip

**IRB**

1. Chairperson: \_\_\_\_\_ Field of Study: \_\_\_\_\_  
Degree(s) and/or Qualification: \_\_\_\_\_  
Institutional Affiliation: \_\_\_\_\_ Phone \_\_\_\_\_  
Complete Mailing Address: \_\_\_\_\_  
Street City Zip

2. Name: \_\_\_\_\_ Field of Study: \_\_\_\_\_  
Degree(s) and/or Qualification: \_\_\_\_\_  
Institutional Affiliation: \_\_\_\_\_ Phone \_\_\_\_\_  
Complete Mailing Address: \_\_\_\_\_  
Street City Zip

3. Name: \_\_\_\_\_ Field of Study: \_\_\_\_\_  
Degree(s) and/or Qualification: \_\_\_\_\_  
Institutional Affiliation: \_\_\_\_\_ Phone \_\_\_\_\_  
Complete Mailing Address: \_\_\_\_\_

Signed: \_\_\_\_\_  
Local/District Affiliated Fair Director

Date: \_\_\_\_\_