

GATEWAY SCIENCE ACADEMY of St. LOUIS SCIENCE FAIR
PROJECT APPROVAL FORM

Please fill this form and submit it to your science teacher to get approval for your project.

1. STUDENT INFORMATION

Name: _____

Grade/Class: _____

Supervisor: _____

2. PROJECT INFORMATION

A. **Project Title:** _____

B. **Hypothesis:**

C. **Summary of Your Project**

Materials needed:

Approved By: _____

Signature : _____

Date: _____