

## **GROUP 4 PROJECT COVER SHEET**

1. NAME \_\_\_\_\_ GROUP # \_\_\_\_\_

2. GROUP MEMBERS \_\_\_\_\_  
\_\_\_\_\_

3. To be stapled to this cover sheet (in this order):

- a) Experiment Planning Form
- b) Individual Time Log
- c) Evaluation of Personal Skills

*Note: These WILL be read by your teacher(s)! Please complete them carefully.*

4. One complete packet of this information is to be submitted. They must be submitted on the date of the final presentations.

For Office Use Only:

PS \_\_\_\_\_ /6

Final Mark \_\_\_\_\_ %

## **Group 4 Project: Experiment Planning Form**

Group Members: \_\_\_\_\_  
\_\_\_\_\_

Subject Teacher: \_\_\_\_\_ Student's name: \_\_\_\_\_

Research Question:

Hypotheses (where appropriate):

### **Elements of Design:**

1. Selecting the variables
  
  
  
  
  
  
  
  
  
  
2. Controlling the variables
  
  
  
  
  
  
  
  
  
  
3. Developing a method for collection of data

Materials required (unusual equipment, chemicals, or normal equipment or chemicals needed in large amounts):