



REGISTRATION FORM - MINORS PARTICIPATING IN ACTIVITIES IN RESEARCH LABORATORIES

Instructions:

- **Section I - Principal Investigator (PI)/Sponsor:**
 - Review Policy and Procedure on Minors in Laboratories at Emory University at <http://policies.emory.edu/7.21> to determine if you should complete this form. In general, **this form does not need to be completed** for Minors who participate in activities in research laboratories because they are (a) enrolled in an Emory University or Oxford College regular catalog course or degree program; or (b) employed by Emory University as a full-time or part-time employee.
 - Complete Section I (subparts A, B, C, and D) and Section III (subpart A only)
 - Submit the completed and signed document (required Sections I, II, III) to EHSO
 - Email completed and signed form to biosafe@emory.edu
- **Section II - Minor:**
 - Complete Section II
 - Return completed and signed form to PI/Sponsor
- **Section III - Parent/Guardian:**
 - Read Section III subpart A and complete Section III subpart B
 - Return completed and signed form to PI/Sponsor
- **Section IV - Emory Environmental Health & Safety Office (EHSO)**
- **Section V - Emory Institutional Animal Care and Use Committee (IACUC)**

NOTE: All required Sections (I, II, and III) must be completed and submitted to EHSO for approval and, in the case of animal research, to the Institutional Animal Care and Use Committee (IACUC) prior to the Minor beginning activities in the laboratory.

SECTION I - Subpart A: (to be completed by PI/Sponsor)

PRINCIPAL INVESTIGATOR/SPONSOR INFORMATION			
PI/Sponsor Name / Title:			
Department:		Phone #:	
Campus Address:		Office Rm #:	
Alternate Lab Contact Name/Title:		Phone #:	
Campus Address:		Room #:	
MINOR INFORMATION			
Name:		Date of Birth:	
Lab Location: (where activities will take place)	Building (abbreviation):	Room:	Phone #:
			Email:
Reason for Request: (check one)	Science Fair Project Volunteering Internship Other:	Project Title: (if applicable)	

SECTION I - Subpart B: *(to be completed by PI/Sponsor)*

Briefly describe the project and the role of the Minor in this project. Describe specific techniques (materials and methods) to be used by the Minor, including animal experiments, if any. Attach separate sheet if necessary.

SECTION I - Subpart C: (to be completed by PI/Sponsor)
SPECIAL REQUIREMENTS FOR RESEARCH INVOLVING ANIMALS

If animals are involved in the research, the following information is required:

Type of Animal:	
IACUC Protocol Number:	

Important Note - As indicated below, the written approval of the IACUC Office will be required prior to the Minor beginning research or work involving animals.

Check here if Subpart C is not applicable

SECTION I - Subpart D: (to be completed by the PI/Sponsor)

I agree to sponsor and provide supervision for _____ (insert Minor's name), and by my signature below I acknowledge and agree as follows:

- I have read, understood and will adhere to the Emory University *Policy and Procedure on Minors in Laboratories at Emory University*.
- I have provided the Minor's hazard specific safety training and had the Minor complete any other training required and provided by EHSO, IACUC or other appropriate Emory units. I provided hazard specific safety training by doing the following:

[insert description of training PI/Sponsor provided to Minor on specific lab hazards]

- Personal protective equipment appropriate for and specific to laboratory hazards will be provided to Minor, and Minor will be instructed in the use/disposal of this equipment.
- While in the laboratory, the Minor will never be left alone and will be supervised at all times by myself or by another responsible faculty member or full-time staff member to whom I have specifically delegated this responsibility.
- Minors shall not be issued card keys to any animal facilities and while in animal facilities, Minors must be continuously accompanied by responsible members of the research team to whom the Division of Animal Resources (DAR) or Yerkes has issued card keys.
- My laboratory is in full compliance with all applicable Emory University safety programs.

Date of last Lab Self-Inspection:	
Lab Self-Inspection conducted by:	

Principal Investigator/Sponsor Name & Title

Department

Principal Investigator/Sponsor Signature

Date

SECTION II: (to be completed by Minor)

- **I have read** the “**Rules for Minors Performing Activities Working in Laboratories**” below.
- **I UNDERSTAND** these rules and **AGREE** to follow them.
- **I UNDERSTAND** that if I do not follow these rules, I may be asked to leave.

Minor Name

Date of Birth

Minor Signature

Date

RULES FOR MINORS PERFORMING ACTIVITIES IN LABORATORIES

1. Never work alone in any laboratory environment or animal facility without direct, immediate adult supervision from the Principal Investigator/Sponsor or someone designated by him/her as supervisor. In the case of animal facilities, your supervisor must have been issued a valid access card key.
2. Always follow the instructions of the Principal Investigator/Sponsor or designated supervisor. Always report any accident (regardless of severity) immediately to the Principal Investigator/Sponsor or designated supervisor.
3. Always wear the personal protective equipment as directed and dispose of it appropriately. This personal protective equipment may include safety glasses, gloves, coats/gowns, and other face/body protection as dictated by the hazard with which you are working.
4. Always keep your hands away from your face and wash them well with soap and water prior to leaving any laboratory area.
5. Never eat, drink, chew gum, smoke, apply lip balm or cosmetics or touch contact lenses while in any laboratory environment.
6. Always wear closed-toe shoes while in any laboratory.
7. Always tie back long hair to keep it out of all the hazards.
8. Always wear clothing that reduces the amount of exposed skin.
9. Always ask questions if you don't understand the safety requirements.

SECTION III - Subpart A:

The information in Subpart A must be completed by the Principal Investigator/Sponsor for the Minor who will be performing activities in an Emory University laboratory.

This information must be completed before registration form is provided to the Minor's Parent/Guardian for review and signature.

ACTIVITY INFORMATION			
Name of Educational Program in which Minor is participating:			
Name of Mentor for Mentorship Relationships:			
Purpose of Activity:			
Location of Activity on Emory Campus:			
Start Date of Activity:		End Date of Activity:	
Animal Use: <i>(check if applicable)</i>		Activity involves working with the following type(s) of Animal:	

SECTION III - Subpart B:

The Parent/Guardian must review the information provided by the PI/Sponsor in this registration form, then complete and sign Section III - Subpart B.

By signing this form, I certify that I:

- Am the parent or legal guardian of the Minor identified below.
- Give my permission for the Minor to participate in the Activity described above.
- Understand that the Activity will take place in a laboratory at Emory University.
- Understand that there are certain hazards and risks involved in taking part in activities in a laboratory including, but not limited to, cuts, scratches, eye injuries, burns, and exposure to potentially harmful chemicals and biological matter and agents that can cause illness and/or injury.
- Understand that if the blank above under “Animal Use” is checked, the activity will involve the use of the described animals.
- Understand that there certain hazards and risk involved in working with animals including, but not limited to, scratches, bites, allergic reactions to animal dander and potential to contract disease from the animal.
- Understand the Minor is responsible for following all rules and instructions while participating in the Activity and that the Minor’s failure to do so will result in his/her participation in the Activity ending.
- Understand that if any time the Emory personnel in charge of the activity decide, in their sole discretion, that it is in the best interest of the Minor or of Emory University for the Minor to no longer participate in the Activity, then the Minor’s participation will immediately end.
- Understand that by participating in this Activity, the Minor will not be an employee of Emory University or a student enrolled in an Emory catalog course or degree program.
- Understand that Emory will not provide any accident or health insurance for the Minor and that it is my responsibility to pay for treatment of any injuries or illness that result from the Minor’s participation in the Activity.
- Understand that in the event of an emergency, Emory will attempt to contact me at the phone numbers that I have provided below, and agree that Emory has my permission to take the Minor for any necessary emergency treatment at the nearest medical facility, even if Emory cannot contact me first.
- Agree that the Minor is voluntarily participating in this educational Activity, and that in consideration of the Minor being able to participate, I will hold harmless and indemnify Emory University, its trustees, faculty, staff and students, from and against any and all claims, damages or liability arising from, or in any way related to, the Minor’s participation in the Activity or presence at Emory facilities in relation with the Activity.

Name of Minor:		Date of Birth:	
Name of School:		Grade Level:	

Parent/Guardian Name

Parent/Guardian Signature

Date

(Section III - Subpart B continues on the next page)

SECTION III - Subpart B: *(continued)*

CONTACT INFORMATION FOR PARENT/GUARDIAN			
Home Phone #:		Work Phone #:	
Cell Phone #:		Pager/Other #:	

CONTACT INFORMATION FOR AN ALTERNATE PERSON TO CONTACT IN THE EVENT OF AN EMERGENCY IF THE PARENT/GUARDIAN NAMED ABOVE CANNOT BE REACHED			
Alternate Contact Person Name:		Relationship to Minor:	
Home Phone #:		Work Phone #:	
Cell Phone #:		Pager/Other #:	

SECTION IV: *(to be completed by EHSO)*
ENVIRONMENTAL HEALTH AND SAFETY OFFICE APPROVAL

Lab Self-Inspection Verified Date LSI Completed:
 EHSO Lab Safety Training for Minors Date Training Completed:
 Hepatitis B Immunization Documentation Received Check here if not applicable:

EHSO Signature

Date

SECTION V: *(to be completed by IACUC)*
INSTITUTION ANIMAL CARE AND USE COMMITTEE

APPROVAL Required for research involving animals

IACUC Signature

Date