

**Risk Assessment for Volunteers and Minors**

This form is to be completed by the Principal Investigator/Laboratory Supervisor (PI/LS) and submitted to the Environmental Health and Safety Office (EHS) at labsafe@gmu.edu.

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| **SECTION 1 – PROPOSED LABORATORY WORK** |

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| **PI/LS Name:**  |       |
| **Project Title:** |       | **EHS Use:** RA       |
| **Project Overview and Description:** |       |
| **Proposed Locations:** |       |
| **IBC Protocol Number (if applicable)** |       |

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| **SECTION 2 – MINOR INFORMATION** |

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| **Name:**       | **Start Date:**       | **Age on Start Date:**       |
| **Date of Birth:**       | **End Date:**       |  |

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| **SECTION 3 – PROJECT PROCEDURES** |

For each item checked below, provide a description including biological materials and chemicals involved, description of procedure or process, the engineering controls and personal protective equipment to be utilized.

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| **Molecular Biology Techniques** |
| **[ ]** RNA Extraction | **[ ]** DNA Extraction | **[ ]** PCR |
| **[ ]** Transfection | **[ ]** Transformation | **[ ]** Gel Electrophoresis |
| **[ ]** DNA Sequencing | **[ ]** Nanoparticle Sample Preparation | **[ ]** Other:       |
| **Description:**       |

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| **Cellular Techniques and Microbiology** |
| **[ ]** Electron Microscopy | **[ ]** Flow Cytometry | **[ ]** Cell Culture – Specify cell lines:       |
| **[ ]** Confocal Microscopy | **[ ]** Fluorescent Microscopy | **[ ]** Microbial Culture –  Specify microbes:       |
| **[ ]** Tissue staining | **[ ]** Laser Capture Microdissection | **[ ]** Viral Plaque - Specify viruses:       |
| **[ ]** Other:       |
| **Description:**       |

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| **Protein Techniques** |
| **[ ]** Protein Extraction | **[ ]** Gel Electrophoresis | **[ ]** Western Blot |
| **[ ]** Immunohistochemistry | **[ ]** Elisa | **[ ]** Reverse Phase Protein Microarrays |
| **[ ]** Mass Spectrometry  | **[ ]** Functional Assay | **[ ]** Nanoparticle Sample Preparation |
| **[ ]** Other:       |
| **Description:**       |

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| **CHEMISTRY/BIOCHEMISTRY** |
| **[ ]** Metabolite Extraction | **[ ]** UV-Vis Spectroscopy | **[ ]** Nanoparticle Development |
| **[ ]** Functional Assay | **[ ]** Other:       |
| **Description:**       |

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| **ANIMAL STUDIES** |
| **[ ]** Live Animals (list below) | **[ ]** Preserved Animal (describe below) | **[ ]** Animal Tissue Collection (list animal species and tissue below) |
| **[ ]** Other:       |
| **Description:**       |

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| **HUMAN MATERIAL** |
| **[ ]** Tissue Sectioning (fixed or unfixed) | **[ ]** Sample Analysis (list sample type below) | **[ ]** Cell Culture (list cell lines below) |
| **[ ]** Other:       |
| **Description:**       |

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| **SECTION 4 – SUPERVISION OF MINORS** |

The university requires that all personnel who work with minors complete a background check through the Department of Human Resources. Please list all personnel who will supervise the minor and indicate whether a background check has been completed.

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| **Name** | **Background Check?** |
|       | **[ ]** YES **[ ]**  NO |
|       | **[ ]** YES **[ ]**  NO |
|       | **[ ]** YES **[ ]**  NO |
|       | **[ ]** YES **[ ]**  NO |

**This form was submitted by:**

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| **FOR EHS USE ONLY** |
| **Additional controls required:**       |
| **Reviewed by:**       |
| **Date approved:**       |