## TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER EL PASO Minors in Laboratories Consent/Signature Sheet

## **Observation/Project Information:**

Printed name of PI/Sponsor		
		PI Department
Laboratory room number(s) where observa	ntion/project will occur	
Date(s) of observation/project		
Personal protective equipment to be used		
Summary of proposed observation/project	including procedure and mate	erials to be utilized:
r Agreement:		
AGREE TO SPONSOR		
ND BY MY SIGNATURE BELOW	AGREE THAT:	
regarding minors in research la	aboratories or animal fac	
	t appropriate for, and spe	inor may participate. ecific to, laboratory hazards will be provide ill times while in the laboratory and never l
		por standard 29 CFR 570.35 "Periods and Co
• My laboratory is in full compli		TTUHSC El Paso safety programs, policies ific safety training by doing the following:

	Printed name of PI/Sponsor	
	Signature of PI/Sponsor	Date
	Printed name of PI/Sponsor's Department Chairperson	
:	Signature of PI/Sponsor's Department Chairperson	Date
or A	Acknowledgment:	
•	I HAVE READ AND UNDERSTAND Attachment B of HSCEP OP 73. Laboratories" information sheet explaining the hazards involved in so I WILL ADHERE TO all applicable TTUHSC El Paso policies and proporatories in order to protect myself and those around me from an accident.	cientific research. Cedures regarding minors in research
•	_ Printed name of Minor	
	Signature of Minor	Date
ent/I	Legal Guardian Agreement:	
	I HAVE READ AND UNDERSTAND Attachment B of HSCEP OP 73. oratories" information sheet describing the potential risks and dangers ject.	
	I AGREE AND UNDERSTAND that my child's research project may be of TTUHSC El Paso and its officers, agents, and employees, if the safe volunteers of TTUHSC El Paso becomes a concern.	
	Printed name of Parent/Legal Guardian	
	Signature of Parent/Legal Guardian	Date

## **Safety Services Approval:**

Safety Services will receive confirmation from the Office of the Vice President for Research on completion of specific safety trainings.

I have reviewed this application and to the best of my knowledge, all applicable TTUHSC El Paso policies and procedures regarding minors in research laboratories have been properly addressed. I have reviewed the following specific requirements:

	The hosting laboratory is in compliance with a policies, and regulations.	oplicable TTUHSC El Paso safety progra	ms,
° [ [ [	The following general and hazard-specific safe  NESOP, STEPS, or Volunteer Orientation t  Laboratory Safety Training Program  Lab specific hazard orientation by PI  Other	, ,	eted:
• Revie	ewed by Safety Services:		
Printe	d name of Reviewer		
Signature	of Reviewer	Date	
• Approve	ed by Safety Services:		
Printed na	me of Approver		
Signature	of Approver	Date	
	I consent form shall be forwarded to the Onlindicated below.	fice of Research Resources for final a	approval and
Printed na	me of Vice President for Research		
Signature	of Vice President for Research	Date	
Distribution:			
Origina	l: Sponsoring Department/Investigate	r	
Copies:	Office of Research Resources		

Safety Services