Minors Working in Labs Form

Proposals are due to RMS at least 2 weeks prior to the beginning of the project.

Principal Investigator

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Email</th>
<th>Phone #</th>
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</thead>
</table>

Minor Info

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
</tr>
</thead>
</table>

Project Info

<table>
<thead>
<tr>
<th>Name of Project</th>
<th>Project Start Date</th>
<th>Project End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location (Building)</td>
<td>Room(s) #</td>
<td></td>
</tr>
</tbody>
</table>

Materials and Equipment to be used.

- Chemicals
  - Flammable
  - Reactive
  - Carcinogenic
  - Toxic
  - Corrosive
  - Oxidizer
  - Cryogen
  - Pharmaceuticals
  - Gasses

- Biological Material
  - Biological Material
  - Bacteria
  - Viruses
  - Fungi
  - Parasites
  - Human Source Material
  - Insects
  - Plants
  - Animals

- Equipment
  - Fume Hood
  - Biosafety Cabinet
  - Laminar Clean Bench
  - Autoclave
  - Centrifuge
  - Analytical Instruments
  - Industrial Machinery
  - Noise Producing Equip.
  - Other Equipment:

Acknowledgement and Signature

By signing below, I agree the all information listed on this form is accurate.

Name (Print Name): ___________________________ Signature: ___________________________ Date: ___________________________