

BIOHAZARDOUS MATERIAL APPLICATION

User Registration # _____

Note: Complete a separate information form for each research protocol.

GENERAL INFORMATION (To be completed for all biohazardous material use)

1. **Principal Investigator:** _____
2. **Date:** _____

Protocol Title: _____

To ensure that ASU employees, students, the public, and the environment are protected from biohazards associated with ASU operations including all educational and research pursuits. All investigators using biohazardous agents and materials must complete this form. Please return the completed form to: Environmental Health and Safety

Dates of Proposed Research: _____

Location(s) of Research (Bldg. /Rooms): _____

2. **Check each use to select the proper appendix(s) to complete for your protocol.**

Type of Biohazardous Material	Human Use	Animal Use	Plant Use	Lab work only (In Culture or In Vitro)
Recombinant DNA				
Select Agent(s)				

Other Biohazardous Material				
Blood borne Pathogens and Other Potentially Infectious Material (OPIM)				

* For specific information see Policies and Procedures Manual

3. Risk Assessment (refer to “Biohazardous Materials Risk Assessment Checklist” Section 4.3.3 of the BioSafety Document):

A. Completed risk assessment for biohazards and other hazards:

Yes

No

B. Non-BioSafety hazards identified:

Yes

No

4. Proposed BioSafety Level (based on laboratory risk assessment)

BSL1

BSL2

No BSL3 or BSL4 Activities Permitted

Biological Safety Cabinet(s) Serial #(s) _____

5. Operational Safeguards and Controls:

Autoclave

Access Control and Warning Signs

Gloves

Lab Coat

Safety Glasses

Splash Shield

Respirator/ Mask

Laboratory Specific Exposure Control Plan

Emergency Procedures and On-site Laboratory BioSafety Spill Kit

Other _____

6. Laboratory Personnel:

Name	Location	Current Training (BioSafety Only)

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This space is for Environmental Health and Safety Use Only		
Form Reviewed by:	DATE:	Form Routed to:
BioSafety Professional Review: <input type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Returned		
Conditional Approv		IBSC _____