



Form can be utilized for Junior and Elementary categories in limited use cases (see below). Needs to be completed and approved prior to beginning of experimentation.

Completed by Student Researcher and Adult Sponsor
Student Name:
itle of Project:
dult Sponsor: Phone/Email:
dult Sponsor Signature: Date:
I have reviewed the SRC PHBA Risk Assessment Guide (2019-2020 Page 17) Research Plan which addresses: Source of organism BSL assessment and determination □ BSL-1 □ BSL-2 Safety precautions and disposal methods
Vhat tissues will be utilized? (Check all that apply and describe further)
Hair hooves nails or feathers
Commercially prepared fixed tissue samples
Store purchased animal products: meat, eggs, animal by-products, pasteurized dairy
escribe the site of experimentation:
rocedures to minimize risk:
isposal methods:
raining student will receive:
completed by Approving Educator
 Approved (complete below and sign) Minimal Risk ☐ Yes ☐ No (if no, require complete SRC paperwork and approval) BSL assessment and determination ☐ BSL-1 ☐ BSL-2 Will be conducted at:
□ Restrictions / Comments:
Printed Name
Signature Date
*If you have any concerns or are not comfortable approving, contact the FRSEF SRC and require SRC paperwork to be completed and submitted. director@flintsciencefair.org