

FRSEF EZ Microbe Culture Form

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:
Title of Project:
Adult Sponsor: Phone/Email:
Adult Sponsor Signature: Date:
 ☐ I have reviewed the SRC PHBA Risk Assessment Guide (2019-2020 Page 17) ☐ Research Plan which addresses: ○ Source of culture ○ BSL assessment and determination □ BSL-1 □ BSL-2 ○ Safety precautions and disposal methods
What culture will be utilized? (Check all that apply and describe further)
□ Yogurt cultures, store purchased yeast
☐ Mold growth on food (stopped within 3 days of visible growth)
□ Mushroom or slime mold
□ Environmental samples w/ low risk
Describe the site of experimentation:
Procedures to minimize risk:
Disposal methods:
Training 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: ○ Will be supervised by:
□ 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