

Georgetown University
Office of Environmental Health and Safety

Room LM-12 Preclinical Science
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Bloodborne Pathogens Refresher Training Declination

Principal Investigator/Supervisor: _____

Building: _____ Lab Number: _____

Department: _____

Telephone Numbers: Office: _____ Lab: _____

This letter intends to certify that I _____ **will not** conduct research using human cell lines, human blood, or any other potentially infectious human body fluids. If I intend to conduct research on human blood or other potentially infectious materials, I will notify the Office of Environmental Health and Safety.

Laboratory Staff Member

Date

Principal Investigator/Supervisor

Date