

Georgetown University

Office of Environmental Health and Safety

LM-12 Preclinical Science Building
3900 Reservoir Road, N. W.
Washington D.C. 20057-1431

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MINOR STUDENT PARENTAL CONSENT FORM

To be Completed By Principal Investigator/Authorized User Prior to Parental Signature

Principal Investigator/Authorized User: _____ **Lab Address:** _____

Name of Minor: _____ **Emergency contact phone:** _____

Date of Birth: _____ **Start Date:** _____ **End Date:** _____

Routine biomedical research involves the use of chemicals, radioisotopes, biohazardous materials and/or scientific instruments which may be hazardous, particularly if used improperly. This research laboratory contains the hazardous substances or devices checked below. A Laboratory Supervisor will provide specific operational procedures, safety precautions, instruction(s), and supervision to the student.

- Biological Hazards**
 - Infectious Agents (Bacteria, viruses, fungi, parasites, rickettsial, prions)**
 - Recombinant DNA**
 - Non-Human Vertebrate Animals and Tissue**
 - Human Blood, Bodily fluids and/or and Tissue**

- Chemicals: (hazardous, flammable, explosive, toxic, carcinogenic, mutagenic, etc.).**

- Equipment: (centrifuges, autoclaves, fume hoods, etc.).**

- Radioactive Materials: (low level stock solutions used in labeling techniques).**

Additionally, your child will be required to attend Basic Laboratory Safety Training (including Biological, Chemical and Radiation Safety) conducted by the Office of Environmental Health & Safety.

“I, the parent/guardian, acknowledge that there are hazards and risks associated with biomedical research and hereby consent and agree to my child’s participation. In consideration of Georgetown’s allowing my child to work in the above-referenced laboratory, I hereby release and hold harmless Georgetown University and its employees from any liability that may arise from my child’s failure to follow proper safety procedures in the Georgetown University laboratory.”

Parent/Guardian Signature Date

Parent/Guardian Name (please print)

A copy of this form must be forwarded to both EH&S and Human Resources.