

**Potentially Hazardous Biological Agents Risk Assessment Form (6A)**

Required for research involving microorganisms, rDNA, fresh/frozen tissue, blood, blood products and body fluids - Science Expo approval required before experimentation.

**Student's Name(s)** \_\_\_\_\_

**Title of Project** \_\_\_\_\_

**To be completed by Student Researcher(s) in collaboration with Qualified Scientist/Designated Supervisor:** (All questions are applicable and must be answered; additional page(s) may be attached.)

1. Identify potentially hazardous biological agents to be used in this experiment. Include the source, quantity and the bio-safety level risk group of each microorganism.
2. Describe the site of experimentation including the level of biological containment.
3. Describe the procedures that will be used to minimize risk (personal protective equip, hood type, etc.)
4. What final bio-safety level do you recommend for this project given the risk assessment you determined?
5. Describe the method of disposal of all cultured materials and other potentially hazardous biological agents.

**To be completed by Qualified Scientist or Designated Supervisor:**

1. What training will the student receive for this project?
2. Do you concur with the bio-safety information and recommendation provided by the student researcher above?  Yes  No  
If no, please explain.
3. Experience/training of Designated Supervisor as it relates to the student's area of research (if applicable)

\_\_\_\_\_  
QS/DS Printed Name

\_\_\_\_\_  
Date of Signature (mm/dd/yy)

\_\_\_\_\_  
Signature