MINORS IN LABORATORIES
CONSENT & CERTIFICATION FORM

THIS SECTION TO BE COMPLETED BY PARENT/LEGAL GUARDIAN OF MINOR

Consent Form

I understand that _______________________, age _______ (print name/age of minor), a minor participating in a laboratory program at the Michigan State University, may study or learn in areas where hazardous substances (chemicals/biologicals, etc.) or physical hazards (very hot or cold temperatures, laser light, electromagnetic frequencies, etc.) are present.

S/he will be informed of the hazards associated with his/her project(s), and will be trained in the relevant safe laboratory work practices. An adult familiar with the project area will supervise him/her and may be contacted at ___(517)__________ (telephone) with any questions.

I ____________________________, (print parent/guardian name) as parent/legal guardian of the minor named above, hereby by give my consent for him/her to participate in a laboratory program at the Michigan State University.

Signed:_________________________ Date:______________
(parent/legal guardian)

THIS SECTION TO BE COMPLETED BY THE PERSON RESPONSIBLE FOR LABORATORY

Certification Form

I, ____________________________ (print employee name) certify that the minor named above has been trained in the relevant safe laboratory work practices described in the Michigan State University Executive Health & Safety Guidance: Minors in Laboratories and will be supervised by an adult familiar with the activities underway in this laboratory.

I also certify that my department head, ____________________________ (print name and title of department head) is aware of, and has approved, this program involving minors in this laboratory.

Signed:_________________________ Date:__________ Telephone:_____

The completed form (with both signatures) is to be retained by the laboratory department’s administrative office. Send a copy of the completed and signed form to EHS.

ORIGINAL: Laboratory, Dept. Admin. Ofc.
COPY TO: Environmental Health and Safety, 4000 Collins Rd