

Parent/Guardian Consent Form for Minors Working in UCSF Research Laboratories

Check here if this Minor will be participating in a research laboratory and/or clinics

Check here if this Minor that will be participating in a classroom or educational outreach program

Minor's Name: _____ Age and Date of Birth: _____

Supervisor: _____ PI: _____

Internship Date*: Begin _____ End _____

Project summary and types of experiments:

Minor's prior research laboratory experience:

Expected Hazardous Materials used:

List Chemicals: _____

List Biological Materials: _____

Completion of Training (must be completed prior to beginning work):

1) Laboratory Safety for Minors (from EH&S):

Trainers Signature: _____ Date: _____

2) Bloodborne Pathogen Training by EH&S:

Trainers Signature: _____ Date: _____

Signatures (must be completed prior to beginning work):

Minor: _____ Parent or
Guardian: _____

PI: _____ Supervisor:
(If different than PI) _____

* This form must be maintained in the lab during internship and available for inspection.