

The University of Montana
Safety Consent for Minors Working in University Research Laboratories

Instructions for Completing the Safety Consent for Minors

The Minor working in your lab must have a signed permission slip before they can start work.

Minor means a person under 18 years of age, including registered students at the University of Montana.

Laboratory means a research or clinical setting where scientific research or instruction is conducted. Laboratories often contain hazardous materials (e.g., hazardous chemicals, biohazardous agents, radioisotopes, etc.) and/or physical safety hazards (e.g., lasers, moving machinery parts, extreme temperature, electrical apparatus, etc.).

Laboratory Supervisor means the individual (e.g., Principal Investigator, Faculty Educator, Lab Manager, etc.) that has direct operational control over the Laboratory.

The Laboratory Supervisor for a Minor should prepare the Safety Consent for Minors for parents or legal guardians of minors to sign and return to the University.

The Safety Consent for Minors should include the following information:

1. Specific chemicals and other hazardous materials the Minor will be handling and what procedures he/she will be performing.
2. The type of supervision the Minor will have when handling potentially hazardous materials.
3. The safety training that will be provided and by whom (see EHRM materials and safety protocols).

Prior to a student working in your Laboratory the following must have occurred, 1) the parents or legal guardians must sign and return the parent consent form, 2) the student must sign and return the students acknowledgment of the Laboratory safety requirements, and 3) the student must complete the appropriate Laboratory safety training. The Laboratory Supervisor should document that these conditions have been met and maintain a copy of the documents in the student's file.

Date: _____

Dear Parent/Legal Guardian:

We feel that you should be informed regarding the University's effort to create and maintain a safe science laboratory environment. With the cooperation of the instructors, parents, and students, a safety instruction program can eliminate, prevent, and correct possible hazards.

Individual laboratories vary in the inherent types of hazards present. While working at the University, your child may encounter these potential hazards, for example, animal, biological, chemical, physical, or radiological hazards. The University of Montana provides safety training to anyone who may work with these materials – in fact, your child is required to complete laboratory safety training before they may work in the laboratory.

No student will be permitted to perform laboratory activities unless this contract is signed by both the student and parent/guardian and is on file with the laboratory. Your signature on this contract indicates that you have read this Safety Agreement, are aware of the measures taken to ensure the safety of your son/daughter in the science laboratory, and will instruct your son/ daughter to uphold his/her agreement to follow these rules and procedures in the laboratory.

If you have further questions on these topics, please call Environmental Health and Risk Management at (406) 243-4503 or visit their web site: <http://www.umt.edu/research/EHRM/default.php>

Your child will work at the University of Montana in a research laboratory in:

Building: _____ Department: _____ Room#: _____

Name of Laboratory: _____

Specific hazards your child may encounter while working in the laboratory: _____

Your child will work under the direct supervision of

Supervisor's Name : _____ Supervisor's Title : _____

Contact Information: _____

Parent/Guardian Consent Form

By signing this letter, you consent to the conditions as outlined above and affirm that you, as the parent or legal guardian, grant permission for your child to work at the University of Montana in the designated laboratory.

I grant my child, _____, permission to participate in the Research Laboratory listed above at the University of Montana. I grant permission to the program and its staff to treat as necessary and/or secure proper treatment for my child in case of injury. I understand that the University of Montana does not carry liability, medical or property damage insurance in these cases, and that the primary responsibility in case of accident will be provided by myself and/or my own insurance.

Parent/Guardian Signature _____

Date _____

Please contact the following in case of emergency:

Parent/Guardian Name: _____

Home telephone: _____ Work telephone: _____

Name of Secondary Emergency Contact: _____

Telephone: _____

NOTE: This consent form, including emergency contact numbers and the signed safety agreement must be kept on file with the laboratory supervisor.

Student Acknowledgement of Lab Safety Responsibilities

I, _____, (student's name) have read and agree to follow all of the safety rules set forth in the training and policies of the University of Montana. I will or have already attended the Laboratory Safety training and had an opportunity to ask questions. I realize that I must obey these rules to ensure my own safety, and that of my fellow students and instructors. I will cooperate to the fullest extent with my instructor and fellow students to maintain a safe lab environment. I will also closely follow the oral and written instructions provided by the instructor. I am aware that any violation of this safety contract that results in unsafe conduct in the laboratory or misbehavior on my part, may result in being removed from the laboratory, receiving a failing grade, and/or dismissal from the program.

Student Signature _____

Date _____

Parent/Guardian Signature _____

Date _____

NOTE: This acknowledgement form must be kept on file with the laboratory supervisor.