## 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.

They will be informed of the hazards associated with their 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 them to participate in a laboratory program at the Michigan State University.

Signed:

(parent/legal guardian)

Date:

# 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