

**REQUEST FOR APPROVAL OF RESEARCH PROJECT INVOLVING
MINOR PARTICIPANTS IN LABORATORIES**

[CERTIFICATION AND APPROVAL PAGE]

(UPDATED FOR CURRENT COVID-19 REQUIREMENTS AND RESTRICTIONS)

Saint Louis University Sponsoring Faculty Member/Researcher Acknowledgement of Policy on Minors in Laboratories and SLU COVID-19 Policies and Requirements:

I, _____, certify that I have read and
(Typed or printed name of sponsoring faculty member/researcher)

understand the *Saint Louis University Policy on Minors in Laboratories* and agree to fully comply with all of the requirements outlined. Furthermore, I will ensure that the minor(s) I am sponsoring will follow all applicable SLU COVID-19 policies and requirements, including submitting proof of COVID-19 vaccination*.

Sponsoring Faculty Member/Researcher: _____
(Signature**)

Date: _____ Campus Phone Number: _____
(Mo/Day/Yr)

* **Proof of Vaccination:** All research projects involving minors in labs approvals are contingent upon each minor submitting satisfactory proof of Covid-19 vaccination, by completing this secure HIPPA compliant online proof of vaccination form and uploading a scan of vaccination card: [Proof of Vaccination](#). See EHS [Minors In Labs](#) website for additional details and requirements for exemptions: [Minors in Labs](#).

** **Signature:** Completed forms may be submitted without signature if emailed from the applicant's SLU [Email address](#) which shall be taken to be equivalent to the applicant's signature for the review phase, in order to expedite submission. A signed copy of this page must be submitted to Environmental Health and Safety by interoffice mail, fax or email (as PDF attachment) before final approval can be granted.

Saint Louis University Environmental Health and Safety (EHS) Use Only				
Area:	BSO	CHO	ARSO	DIR
Initials:				
Review Date:	/ /	/ /	/ /	/ /
<u>APPROVAL</u>				
Minors In Laboratories Approved Project No.:		<input type="text"/>		
Approved by:			Date of Approval:	
_____ (Signature) Printed Name: Mark G. Haenchen, M.S., J.D. Title: Executive Director, Environmental Health & Safety			_____ (Mo/Day/Yr)	
Copies to (as checked):				
<input type="checkbox"/> Sponsoring Faculty Member <input type="checkbox"/> Researcher's Department Chairperson <input type="checkbox"/> Department Business Manager <input type="checkbox"/> Dean		<input type="checkbox"/> Vice President for Research <input type="checkbox"/> Associate Vice President for Research <input type="checkbox"/> Building Manager – if applicable <input type="checkbox"/> Other: _____		

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INSTRUCTIONS TO SPONSORING FACULTY MEMBER/RESEARCHER

1. Complete all pages of this form, and execution of the Sponsoring Faculty Member/Researcher Acknowledgement on page one.
2. Forward the completed request, inclusive of all executed Parent/Guardian Consents, at least two weeks in advance of the proposed start date, either by:
 - (a) Interoffice mail to Environmental Health and Safety, Caroline Building, Suite C305, **or**
 - (b) Email, with a PDF scan of the executed forms attached, to: minorsinlabs@slu.edu
3. If you have any questions about your request or need assistance completing the forms, please contact our office at minorsinlabs@slu.edu or call Renee Knoll at 314-977-6884 (office) or 314-210-3757 (cell phone) during work-at-home hours due to COVID-19 pandemic.

COVID-19 PANDEMIC RESTRICTIONS

The following research related programs for minor participants marked with an “X” are currently suspended during the COVID-19 Pandemic:

- Scouts Special Tour

On-campus participation at SLU by high school students in programs listed below may be considered for review and approval by SLU/EHS, **subject to SLU COVID-19 policies* and each program’s COVID-19 restrictions**. Sponsoring faculty members, minor participants and parents of minor participants must provide appropriate certifications elsewhere in FORM A or FORM B, including regarding the minor’s adherence to University COVID-19 policies and safety requirements while on campus, to be enforced by the sponsoring faculty member.

*** Each minor must submit satisfactory proof of COVID-19 vaccination. See page 1 of this form and the [Minors in Labs](#) web page for details.**

Reason for Request:

- | | |
|--|---|
| <input type="checkbox"/> [A] UMSL’s – STARS (Students and Teachers As Scientists) Program | <input type="checkbox"/> [F] High School Student Volunteering in Research Lab (no formal program affiliation) |
| <input type="checkbox"/> [B] St. Louis Science Center – YES (Youth Exploring Sciences) Program | <input type="checkbox"/> [G] Science Fair Project (that is part of an official school program – must complete High School information below) |
| <input type="checkbox"/> [C] St. Louis Zoo Active ALIVE (Leaders In Volunteer Education) Program | <input type="checkbox"/> [H] Area High School Research Project (required for high school grade/credit – must complete High School information below) |
| <input type="checkbox"/> [D] Rockwood School District Project Interface | |
| <input type="checkbox"/> [E] National Science Foundation (NSF) Program (specify): | |



High School Information (Required to be completed for [G] and [H] above.)

Name of Sponsoring School: _____

High School Official: _____
(Name) (Title)

(Signature) (Date)

Contact Information: _____
(Email) (Phone)

Applicant:

(Sponsoring SLU Faculty Member/Researcher) (Department)

Email: _____ Phone: _____

Lab Supervision:

(Other Designated Lab Supervisor of Minor(s) – If applicable) (Department)

(Other Designated Lab Supervisor of Minor(s) – If applicable) (Department)

Lab Locations: Campus locations/addresses at which activities will take place [Include building name(s) and room number(s)]:

Start Date of Minor(s): _____
(Mo/Day/Yr)

Daily Start Time: _____

End Date of Minor(s): _____
(Mo/Day/Yr)

Daily End Time: _____

Project Title:

Description of Project: See text box below. See additional page(s) attached.

Animal Use? **No**

Yes; if yes, answer the following questions:

- (a) Will the minor participant be working with live animals? Yes No
- (b) If yes to (a), specify applicable IACUC protocol number(s): _____
- (c) Will the minor participant need access to the animal facility? Yes No
- (d) Will the minor participant be handling animal products or dead animals? Yes No

Biological Materials Use? **No**

Yes; but *not a known or potentially hazardous biological material.*

(a) If yes, please list or provide a description of the biological materials that the minor participant will be working with:

Yes; a *known or potentially hazardous biological material but used for teaching purposes only.*

(This includes work with attenuated strains of microbial pathogens and human-derived materials.)

(a) If yes, please list or provide a description of the biological material the minor participant will be working with:

(b) If human-derived materials human derived materials, please confirm that OSHA required Bloodborne Pathogen (BBP) training has been completed for each Saint Louis University employee by providing their names, titles and the training date(s) in the table below.

Name	Title	Date Completed BBP Training

Note: *Minor participants will also be required to complete BBP training prior to working with human derived materials.*

Yes; a *known or potentially hazardous biological material, or recombinant nucleic acid biological material, used in research.*

(a) If yes, specify applicable IBC protocol number(s): _____

(b) If yes, has an amendment adding the student(s) to each IBC protocol been made?

Yes *(a copy is included with this application)*

No *(approval of this request for approval of research project involving minors in laboratories will be delayed or denied)*

Chemical Use? **No**

Yes; hazardous chemicals are used, see text box below. See additional page(s) attached.

- (1) _____
- (2) _____
- (3) _____
- (4) _____
- (5) _____
- (6) _____
- (7) _____
- (8) _____

Role of the minor(s) in project: See text box below. See additional page(s) attached.

List Minor Participant(s):

Last Name	First Name	Age	Parent/Guardian Consent Attached
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No