**New Biosafety Permit Application Form**

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| **Applicant Information** |
| Last Name (Print): |  |
| First Name(Print): |  |
| Department: |  |
| Office Telephone Number: |  |
| Laboratory Telephone Number: |  |
| Email Address: |  |
|  |
| Animal Welfare Protocol # (if working with animals) |  |
|  |
| **Information that is to Accompany the Permit Application\*** | **Check**  |
| Biosafety Plan (see Biosafety Plan Procedure) |  |
| A list of individuals (authorized workers) who will be working under the permit |  |
| Authorized Worker Biosafety Training Record for each authorized worker |  |
| The information provided in this application and supporting documentation is complete and accurate to the best of my knowledgeSignature of **Applicant**:Date: Signature of the **Department Chair:** Date:  |
| The New Biosafety Permit application has been received with required supporting documentationSignature of the **Biosafety Officer**:Date:  |

\*New Biosafety Permit applications will not be approved without the required supporting documentation.