



Schedule 10B, Risk Assessment - Adding New Personnel

Protocol #

Date

Name and signature of Principal Investigator

(Signature confirms the information in this Schedule is accurate and current and hereby declares they will conduct the work according to the terms and conditions of the approved schedule 10a for the protocol number above. The Principal Investigator assumes responsibility for the conduct of their staff listed below while they are in the animal holding facility.)

Principal Investigator

Name and signature of new personnel added to the protocol via an amendment

(Signature confirms having read, understood and agree to abide by the terms and conditions stated in the Schedule 10 submitted for protocol number above.)

Research Personnel

Research Personnel

Research Personnel

Research Personnel

Research Personnel

Research Personnel

Name and signature of Facility Area Supervisor

(Signature confirms that research personnel listed above have completed facility orientation)

Facility Area Supervisor

Telephone Number

Name and signature of Facility Manager/Facility Supervisor

(Signature confirms having reviewed this Schedule and being satisfied with Physical and Operational requirements for the proposed animal work.)

Facility Manager

Telephone Number

Name and signature of Environmental Health and Safety Office Official

(Signature confirms having reviewed Schedule 10 and being satisfied with the hazard assessment and risk control strategies agreed upon.)

Steven Cole

Environmental Health & Safety

Animal Care Occupational Health Specialist Tel:

204 789 3675

Training dates

Biosafety	Radiation Safety	WHMIS