

Request for Minor* Access to ASU Laboratories

(* A minor is anyone under 18 years of age)

Minors under 16 years of age are not allowed to work in areas where hazardous materials are used or stored.

Date of Request:		Requesting Unit or Department:	
Request Contact:		Individual making the request:	
Name of ASU-sponsored or Approved Program:			

MINOR'S INFORMATION

LEGAL GUARDIAN'S INFORMATION

Legal Name:		Legal Name:	
Birthdate (MM/DD/YR)		Relationship to Minor:	
Contact Phone:		Contact Phone:	
Email Address:		Email Address:	

ACCESS INFORMATION

Start Date:		Hours Per Week:	
End Date:			
Purpose (Brief Description):			

Please **describe in detail, all tasks**, include tasks to be performed, equipment utilized, potential hazards, chemicals, biohazards, etc., the minor will use, perform or participate in. Please print or type.

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Please check if the minor will be working with the following. **Note: Minors under 18 are NOT allowed to work with radioactive materials or X-ray generating equipment.**

- Biohazards such as bacteria, viruses, parasites, fungi, human blood, tissues, and cell lines (see page 6 of the [ASU Biological Safety Manual](#) for more information)
- Live animals
- Lathes, saws, or other shop equipment
- Particularly Hazardous Substances (see Appendix C of the [ASU Chemical Hygiene Plan](#) for more information)

Location of Lab/Building:	
Principal Investigator:	
Lab Registration Date:	
Lab Inspection Date:	

DIRECT SUPERVISION INFORMATION

All minors are required to be under direct supervision at all times while inside the laboratories. Who will provide direct supervision?			
ASU Employee Name:		Employee Title:	
Office Location:		Contact Phone:	
Has this supervisor passed the ASU Criminal Background Check (including fingerprinting) as required by ASU ACD 126 and A.R.S. 15-1649?			<input type="checkbox"/> Yes <input type="checkbox"/> No

Direct Supervisor and Department Director Approvals

The minor will not be using any radioactive material while at ASU. The minor will also be trained and certified in State mandated fire, security and laboratory safety procedures during the next available training classes. The minor will also be trained in their lab-specific duties by their direct supervisor.	
Direct Supervisor Name:	Direct Supervisor Signature:
Name of Individual Making the Request:	Signature of Individual Making the Request:
Department Director Name:	Department Director Signature:

NOTE: All information must be legible and complete in order to be considered for review and approval by ASU EH&S and Risk Management. Please send completed form to Leon Igras, Director of Environmental Health and Safety at Leon.Igras@asu.edu.

ADMINISTRATION APPROVALS – OFFICIAL USE ONLY

Risk Management or Designee	
Waiver Sent Date:	
Risk Management Director/Designee Name:	Risk Management Director/Designee Signature:

EH&S	
Approval Date:	
Required Trainings (Circle All That Apply)	Completion Date
Biosafety & Bloodborne Pathogens	
Compressed Gases	
Fire Safety	
Laboratory Safety	
Other (Please specify)	
EH&S Director Name:	EH&S Director Signature: