CNS Biological Safety Requirements Form
Required prior to final qualification on the G05 Laboratory

Pre-Approval Checklist

<table>
<thead>
<tr>
<th>#</th>
<th>Requirement</th>
<th>Complete</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Understand the information on the Harvard EH&amp;S Biosafety website: <a href="http://www.ehs.harvard.edu/services/biosafety">link</a> and review the information and links on the Harvard EH&amp;S Bloodborne Pathogens webpage: <a href="http://www.ehs.harvard.edu/programs/bloodborne-pathogens">link</a></td>
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<td>2</td>
<td>Take the online Biosafety Class offered by Harvard EH&amp;S: <a href="http://www.ehs.harvard.edu/training">link</a> by clicking on the green icon “Training management system” and taking LAB 103. Non-Harvard users must contact John Sweeney (phone: 617-495-1290, email: <a href="mailto:john_sweeney@harvard.edu">john_sweeney@harvard.edu</a>) to be added to Fettah’s roster or Fettah Kosar to be added to his roster (phone: 617-495-1738, email: <a href="mailto:fkosar@cns.fas.harvard.edu">fkosar@cns.fas.harvard.edu</a>). Email biosafety certificates to Jim Reynolds (<a href="mailto:reynolds@cns.fas.harvard.edu">reynolds@cns.fas.harvard.edu</a>).</td>
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<td>3</td>
<td>Understand that if you are required to work with certain human materials then you may be considered to have “Occupational Exposure” under the OSHA Bloodborne Pathogen Standard. Contact your employer for information on receiving the Hepatitis B vaccination and other relevant information applicable to this Standard.</td>
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| 4 | Only for those who will use the biohoods:  
4.1 Please watch [link](http://youtu.be/0ixPQApjK00) and email Arthur (amcclelland@cns.fas.harvard.edu) the answers to the four questions.  
4.2 For the second and last mandatory video at [link](http://youtu.be/d_bWUkPrQzk), please answer the question by emailing Arthur (amcclelland@cns.fas.harvard.edu): How many times can you reuse isopropyl alcohol in the Mr. Frosty freezing container with blue lid, which sits on top of the “Flammables” cabinet? |          |
| 5 | Complete the User information below and sign the completed form and return it to the CNS Administrative Office, LISE 306. You can return the form in person or by fax (617-384-7302). |          |

User Information and Signature

User Name (please print):

PI Name:

Group/Organization:

Phone: e-mail:

Signature: Date:

CNS Staff Signature

Staff Name (please print):

Signature: Date: