

# Undergraduate Research Contract Form

## UNL School of Biological Sciences

**Instruction:** Students should fill out all blanks in the form with the assistance of their supervising professor(s) for the undergraduate research described in the contract. **The Safety Assessment form is to be completed at the supervising professor's discretion.** The completed Research Contract Form, the Safety Assessment Form, and completion receipts of the online safety trainings should be printed out and submitted to Dr. David Woodman or Lexi Thomas in Manter Hall room 402 for obtaining the registration permission code.

Name of the Student: \_\_\_\_\_ NU I.D. #: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Supervising Professor: \_\_\_\_\_

Course #: \_\_\_\_\_ Credit Hours: \_\_\_\_\_ Minimum Research Hours per Week: \_\_\_\_\_

Semester: \_\_\_\_\_ Academic Year: \_\_\_\_\_

Description of Research Project:

\_\_\_\_\_

\_\_\_\_\_

**Basis of Grade:** *(Please indicate % of grade assigned to each required activity and expectations)*

Lab Work: \_\_\_\_\_ Weekly Meeting: \_\_\_\_\_ Presentation: \_\_\_\_\_ Final Report: \_\_\_\_\_

Others: \_\_\_\_\_ Total: 100%

**Required Signature:**

Student: \_\_\_\_\_ Date: \_\_\_\_\_

Supervising Professor: \_\_\_\_\_ Date: \_\_\_\_\_

# UNL School of Biological Sciences

## SAFETY ASSESSMENT FORM

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_ Lab director: \_\_\_\_\_

Your status (check one):    Undergraduate          Graduate          Postdoc          Visiting Scholar

If others, please describe: \_\_\_\_\_

### A. COMPLETE THE APPROPRIATE WEB-BASED ASSESSMENT

If your activities will **not involve hazardous materials**, complete the assessment at <http://chem.unl.edu/safety-training-quizz>. **Continue to D if your activities will not involve hazardous materials (check with your advisor).**

If your activities may **involve hazardous materials**, complete the assessment at <http://chem.unl.edu/safety-training-quizz-wet-labs>, and continue to complete B, C and D.

### B. HAZARD IDENTIFICATION

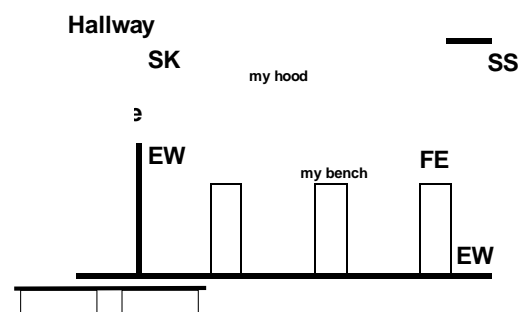
After discussions with your supervisor, lab director, or lab mentor, circle all hazards you expect to encounter in your research or teaching:

Mechanical (moving parts)	Oxidizers (e.g., "piranha solution", nitric acid)	Corrosives (e.g., strong acids)	Pyrophoric or water-reactive materials
Highly toxic materials	High voltage equipment (> 220 V)	High pressure gases	Strong magnetic fields
Flammable Liquids	Biohazards (give some idea below)	Radioactive materials	High intensity UV sources or lasers

### C. KNOWLEDGE OF EMERGENCY/SAFETY EQUIPMENT

On the back of this sheet (or on a separate attached sheet):

1. Draw an outline of the lab or workspace including the hallway and nearest exits (doors). See example on the right.
2. Use a stick figure to show where you will be working or teaching.
3. Show the locations of the nearest fire extinguisher (**FE**) and safety shower (**SS**). If you will be working in any lab setting, also indicate the location of the nearest eyewash (**EW**) and spill kit (**SK**).
4. If you work with hazardous materials and you will be teaching a lab, provide a sketch of the teaching lab.



### D. AFTER COMPLETING PARTS A, B, AND C, YOU MUST TURN IN THIS FORM

Your safety training record will remain incomplete until this completed form and your receipt(s) of successfully completed online training modules are submitted.