

Principal Investigator Consent Form for Working Alone and Working Alone on High-Risk Activities
University of Notre Dame
Department of Chemistry & Biochemistry

A. No Consent for Working Alone

I do not consent to any of my research personnel to work alone.

If A is checked Skip B, C, and D

B. No Consent for Working Alone on High-Risk Activities

I do not consent to any of my research personnel to work alone on High-Risk activities.

If B is checked, Skip C and D

C. No Consent for Working Alone on High-Risk Activities after-hours

I do not consent to any of my research personnel to work alone on High-Risk activities after-hours.

D. I consent to the following to work alone on High-Risk activities with the stipulated restriction in C if checked:

D1. Principal Investigator

Myself

D2. Research faculty, postdoctoral/visiting researchers, and/or research staff

All research faculty, postdocs/visiting researchers, and/or research staff in my laboratory:

The following research faculty, postdocs/visiting researchers, and/or research staff in my laboratory:

D3. Graduate students

- All graduate students in my laboratory enrolled in CHEM98698 or 98699 or 98700:
- The following graduate students in my laboratory enrolled in CHEM98698 or 98699 or 98700:

I have reviewed relevant safety protocols and risk mitigation strategies with each individual identified above who has been allowed to conduct these activities. For High-Risk, after-hours activities, I have also created specific SOPs that are kept on file in the Laboratory. I have also required my personnel to follow the general SOPs listed in **Section F** of the Working Alone Policy.

Signature of PI (Type in name as a digital signature)

Date

Email to Mary Prorok: mprorok@nd.edu