

PRE-REGIONAL COMPETITION PROJECT BIOSAFETY REVIEW CHECKLIST

STUDENT NAME: _____

Check appropriate box to answer each question!

	YES	NO	N/A
1. Was this project completed in an appropriate laboratory setting (IF REQUIRED by ISEF Rules) with the appropriate level of biological containment according to ISEF Rules?			
2. Did the Qualified Scientist certify the student was directly supervised and provided with biosafety training <i>(according to lab policies, regulations, etc. and indicated via ISEF Form 2...may also be on ISEF Form 3 if the student worked in a Regulated Research Institution)?</i>			
3. Was this project completed in a UNM or other Regulated Research Institution Laboratory?			
4. If YES, did the PI obtain appropriate Biosafety Review Committee approval BEFORE the student began work in his/her lab with biological agents requiring IBC review? <i>If NO, check the N/A box to the right.</i>			
5. Do you concur that this project may advance to compete at the Central NM Science & Engineering Research Challenge?			

COMMENTS:

UNM Biosafety Compliance Reviewer Signature

Date

(electronic signature acceptable on PDF versions)