OntarioTech Ontario Tech Request to Initiate Essential Research and Lab Activation Form

This form must be completed and submitted in order to initiate on-campus research and laboratory activities during a period of essential activities only. Please submit this form at least 48-hours in advance of required campus access to allow the coordination of research support. Please submit one form for each project to Research Services (see Approvals Section). Follow-up will be provided by Risk Management.

Criteria of Approval: The criteria for approval of laboratory activities must include the following:

- Adequate personnel available to conduct the research and/or activity while respecting public health recommendations:
 - practice proper hygiene (wash your hands, cough or sneeze into a tissue or the bend of your arm, dispose of any tissues you have used as soon as possible in a lined waste basket and wash your hands afterwards)
 - o maintain physical distancing of at least 2 metres,
 - o avoid crowding and non-essential gatherings while working,
 - o no more than 5 people for essential gatherings,
 - o avoid common touch greetings, such as handshakes,
 - o stay home if you are ill.
- All laboratory rules and procedures to be followed, and
- A demonstrated critical need to initiate on-campus lab activities, which must be clearly justified in this form

Principal Investigator:

Department:

Title of Project:

Level of Project: Faculty Postdoctor Fellow Graduate student

If this research is funded (including from internal sources e.g. start-up) please list:

Sponsor (NSERC, University, etc.) Program (Alliance, Start-Up, etc.)

Is the research specific to COVID-19? Yes - Please fill out Appendix No

Persons who will be using the space: (include role: Post-Doctoral, Graduate Student, Visiting Scholar, etc.)

| First Name | Last Name | Project Role | Contact Email and/or Cell phone Number: |
|------------|-----------|--------------|--|
| | | | |

Required Access (Campus Security requires all rooms MUST be listed otherwise access will not be granted):

| 1. Building: | Room(s): | 2. Building: | Room(s): |
|-----------------|----------|-----------------|----------|
| 3. Building: | Room(s): | 4. Building: | Room(s): |

Ontario Tech On-campus Resources Being Used for Project:

| Laboratory Space | Office | X-Ray Laboratory | Laser Laboratory |
|--------------------------|----------------------|-------------------|-------------------------|
| Biosafety 1/2 Laboratory | Radiation Laboratory | Animal Facilities | Other (please specify): |

Required Certifications or Permits for Project:

| Human | Biosafety | Animal | Radiation/X-Ray/Laser | Other (Please specify): |
|-------|-----------|--------|-----------------------|-------------------------|
|-------|-----------|--------|-----------------------|-------------------------|

(Please Contact the Research Ethics/Biosafety/Radiation Safety Officer if you require an update on the status of your project/permit: <u>researchethics@onariotechu.ca</u>, <u>radbio@ontariotechu.ca</u>)

Please check all the services that you require to support your project:

Research should not proceed without appropriate administrative support (custodial, administrative, financial, and others needed to sustain the research activities)

| Science Stores | Procurement | Shipping/Receiving | Autoclave |
|--------------------------|-------------|-------------------------|-----------|
| Hazardous Waste Disposal | | Other (please specify): | |

Rationale For Request to Initiate Research and/or Lab Activity (include the length of time / frequency of access that will be needed,, project start and end dates if known, all partners involved and their roles):

How will physical distancing be maintained?

Can workers of external organizations be tracked through campus security? YES NO - if NO, please explain how their work on campus will be tracked and how they can be contacted:

Principal Investigator Acknowledgement:

I, as well as others using the space, have read and understood the information on the <u>Health and Safety Emergency</u> <u>Preparedness Website</u>.

I, as well as others using the space, have read and understood the research facilities and lab safety information on the <u>research-related FAQs</u>.

I, as well as others using the space, will follow all <u>laboratory rules</u>, <u>procedures</u>, and public health recommendations during the period of essential work only on-campus.

Approvals:

| 1. Please send to your Faculty Dean for review and signature: | 2. Please send to <u>research@ontariotechu.ca</u> for review and signature: |
|---|--|
| | LES JACOBS |
| FACULTY DEAN | VICE-PRESIDENT RESEARCH AND INNOVATION |
| Signature: | Signature: |
| Date: | Date: |
| | o: Jacquelyn Dupuis <u>Jacquelyn.Dupuis@ontariotechu.ca</u> |

cc: Health and Safety Office: Maureen Calhoun <u>Maureen.Calhoun@dc-uoit.ca</u> cc: Research Services: <u>research@ontariotechu.ca</u> cc: Principal Investigator