Risk Assessment and Designated Supervisor** Form

This form must be completed before testing. Use the back of this form, if needed.

Student Name		
Project Problem		
To be completed by the Student Rese Supervisor**. (If team project, both team 1. List all activities, chemicals, living org	members must complete a fo	rm.)
2. Identify and assess the risks involved	in this project. (see Studer	nt Handbook)
3. If you are testing in the field (away fro	om home or school), descri	be the risks of the location.
4. Describe the safety precautions and p	procedures that will be use	d to reduce the risks.
5. Describe the disposal procedure that	will be used at project com	pletion.
To be completed by the Designated I agree with the risk assessment and so certify that I have reviewed the testing all phases of the project, including testing	afety precautions and proce procedures and will provide	
Designated Supervisor (printed)	Signature	Date
Phone or Email		
**A Designated Supervisor is any adult (inc	luding parent or quardian) wh	o oversees the student during

^{**}A Designated Supervisor is any adult (including parent or guardian) who oversees the student during testing and disposal.