

## Biosafety Questionnaire (Plant and Seed Samples)

It is the policy of the MU Institutional Biosafety Committee (IBC) that all research conducted on the MU campus or other MU facilities or sponsored by the University involving transgenic plants and seeds must receive approval from the IBC prior to the start of any work. Therefore, please fill out this questionnaire and include as many details as possible. The principal investigator should sign and submit the completed form to the GTC **before** the planned experiment. Once the GTC director approves the form the experiment will be scheduled.

**Project Title:** \_\_\_\_\_

**Principal Investigator:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Project start and end dates:** Start: \_\_\_\_\_ End: \_\_\_\_\_

**List the species of the sample:**

Arabidopsis  Maize  Soybean  Tobacco  Bacteria  Other \_\_\_\_\_

**Will you be working with transgenic plants or seeds?**

Yes  No

**Are there any special safety concerns or risks of which the MCC staff should be aware?**

Yes  No

If yes, please describe here:

**Does this project have a current Institutional Biosafety Committee (IBC) approval?**

**Yes.** Attach a copy of IBC approval Letter or IBC protocol number. IBC protocol # \_\_\_\_\_

**No.** If no, the work with transgenic plants cannot be conducted until the IBC has approved the study. Questions? Contact the Environmental Health & Safety Office at (573) 882-7018

**Exempt.** (Plant material is considered exempt and non-regulated under USDA and MU's IBC policies)

**Entering your name indicates you have read above questions carefully and certify the information provided to be correct**

**Name** \_\_\_\_\_ **Date (mm/dd/year)** \_\_\_\_\_

**Title** \_\_\_\_\_



<b>FOR DNACF USE ONLY</b>
<b>COMMENTS</b>
<b>BIOSAFETY LEVEL:</b> _____
<b>APPROVED:</b> Yes ___ No ___ <b>DATE:</b> _____
<b>APPROVED BY:</b> _____