

ORC USE ONLY	
BUP #:	<input type="text"/>
Date Received:	<input type="text"/>

Part IV: Personnel List

Biohazardous Use Protocol for Research, Testing, or Teaching



Personnel List

To be completed by the lab director (or PI). List each individual who will work under this BUP in a laboratory that is **BSL 2 and above**.

If this information is being provided here via a **separate document**, write "see attachment entitled [insert name]" in the first line below and provide the attachment.

If the BUP is submitted for **teaching** and a request is being made here to use the **student roster** from the applicable Blackboard safety seminar course, write "request Blackboard safety seminar for [insert course name and number]" and ORC will request this information from EHS.

* Action Type	Last Name	First Name	** OHSP (E, O, or N)	BSL containment for work to be performed	Biohazardous material(s) to be used or have access	Building, Room Number	Position/Title	Email Address

* A (Add) / D (Delete) / M (Modify)

** Indicate whether the individual has enrolled-in (E), opted-out of (O), or not completed (N) the Occupational Health and Safety Program (OHSP) enrollment form. **Enrollment or opt-out by all personnel is required before a BUP will be approved by the IBC.**