

ORC USE ONLY

BUP #:

Date Received:

Completion Report

for

Biohazardous Use Protocol for Research, Testing, or Teaching



Instructions and Certifications

Complete this form if the research, testing, or teaching has ended and/or will no longer be conducted under the applicable Biohazardous Use Protocol for Research, Testing, or Teaching (BUP) or Amendment.

By signing this Completion Report for Biohazardous Use Protocol for Research, Testing, or Teaching ("Completion Report"), all Principal Investigators (PIs), co-PIs, and personnel (collectively, "Researchers") or Instructor(s), as applicable, certify the following:

1. The research, testing, or teaching will no longer be conducted under the applicable BUP or Amendment and/or the research, testing, or teaching has ended;
2. Have read and understood the "Responsibilities of the Principal Investigator" as set forth in TAMUCC Rule 15.99.06.C1; and
3. Have read and reviewed this Completion Report; have signed the Completion Report electronically.

After completing the foregoing, submit the Completion Report via email to:

IBC@tamucc.edu

BUP #:

Maestro # (if funded):

Principal Investigator or Instructor

Name:

Address

(Building and Room):

Email:

Phone:

Laboratory location

(Building and Room):

Co-Principal Investigator or Instructor

Name:

Address
(Building and Room):

Email:

Phone:

Laboratory location
(Building and Room):

Co-Principal Investigator or Instructor

Name:

Address
(Building and Room):

Email:

Phone:

Laboratory location
(Building and Room):

Overview

Completion Date:

Indicate whether there were any unanticipated or anticipated adverse events.

Yes

No

If "**yes**," provide a detailed description of the event(s), actions taken to manage it, and preventive procedure(s) implemented.

Describe any outstanding actions and plans for completion here (*e.g.*, disposal of contaminated materials).

Researcher or Instructor Signatures

By signing this Completion Report, the Researcher(s) or Instructor(s), as applicable, certifies that he/she has read and understood the requirements and responsibilities set forth in the section entitled "Instructions and Certifications" in relation to the research, testing, or teaching. In addition, the Researcher(s) or Instructor(s) certifies that he/she will abide by any and all applicable federal, state, and/or institutional regulations, including any requirements from the Institutional Biosafety Committee (IBC), Environmental, Health and Safety (EHS), and/or the Office of Research Compliance (ORC).

Principal Investigator or Instructor

Name:

Signature:

Date:

Co-Principal Investigator or Instructor

Name:

Signature:

Date:

Co-Principal Investigator or Instructor

Name:

Signature:

Date: