

### About this form

 All research projects approved by the Biosafety Committee (IBC) must meet reporting requirements to maintain ongoing approval.

### Completing the form

**DO NOT COMPLETE THIS FORM IN A WEB BROWSER.** You will not be able to save your data or sign the form in a browser. First SAVE this form, then OPEN the file in Adobe Acrobat Reader or Adobe Acrobat Pro.

- This checklist can be completed electronically.
- The Primary Contact is responsible for completing and submitting this form to biosafety@csu.edu.au
- Digital forms and electronic signatures are preferred.
- If you have any questions, please contact <a href="mailto:biosafety@csu.edu.au">biosafety@csu.edu.au</a>

#### Submitting the report

- 1. Before submitting, please check that you have attached any additional documents, such as such as copies of written approvals or additional pages of information relating to this form.
- 2. Submit the complete application to <a href="mailto:biosafety@csu.edu.au">biosafety@csu.edu.au</a>
- 3. For IBC agenda closing dates, see the IBC Meeting Schedule on the IBC website

#### Notification of outcome

The nominated Primary Contact will receive notification of outcome by email once the request has been considered.

Please do not assume a request has been granted until you are formally advised by the Biosafety Committee in writing.

# 1. Staff/Student details

Full Name	
Staff/Student ID	
School / Faculty / Organisation / Unit	
Campus / Location	

## 2. Application details

Project Title
Project Supervisor Full Name
School / Faculty / Organisation / Unit
Campus / Location
Email
Phone
From (date)
Until (date)

Type of Animal Biological Specimen required (for samples where there is the possibility of zoonosis)

# 4. Facility / Location Details

Facility			
Location (building and room number)			
Justification for the exemption (if applicable)			
Have you attached the Risk Assessment/SWP for the procedure?	Yes	No	
Have you applied for other compliance committee approvals? If Yes, list which ones	Yes	No	Not applicable
If Not Applicable, provide a brief justification			
Have you attached immunisation documents, if required?	Yes	No	
Additional Information which may help with the application, such as waste disposal			

# 5. Signatures and approvals

## 5.1 **Principal Investigator**

Name of Principal Investigator	
Date	
Signature	

## 5.2 Facility Manager

Name of Facility Manager	
Date	
Signature	

## 5.3 Institutional Biosafety Committee approval

Name of IBC Presiding Officer	
Date	
Signature/s (or attach email approval)	

(Note: Retain copy with facility records)

