CONSENT & RELEASE FORM

Date:

Parent/Legal Guardian Name
Address

Dear Parent/Legal Guardian:

This consent and release form is required as part of an application for ____________
High School Student Name
to participate in an educational program at the University of Pennsylvania (Penn) in a
research laboratory in the School of _______ in the Department of _____________. Your child will
work under the direct supervision of ____________ in _____________.

Name & Title Bldg. Name and Room Number.

Individual laboratories vary in the inherent types of potential hazards present. While
participating in this program, your child may need to work with or around research animals,
biological materials, chemicals or other potentially hazardous materials. As part of
his/her project, ____________ will conduct the following activities:

High School Student Name

Describe proposed lab activities that will be performed by student.

Penn provides safety training to all personnel who may work with or in the vicinity of
potentially hazardous materials. Your child will be required to either attend laboratory
safety training or complete an online laboratory safety module.

Sincerely,
Program Director or PI

Contact Information

Signature Sheet

Revised 04-08-2013
I agree to sponsor ______________ and by my signature below agree that I have read, understand and will adhere to the Penn Policy on High School Students working in laboratories. He/she will be directly supervised at all times by ______________

Name of PI/Sponsor

____________________________________
Signature  Date

Student

I will adhere to the Penn Policy on High School Students working in laboratories in order to protect myself and those around me from an accidental exposure.

Name of High School Student

____________________________________
Signature  Date

Parent/Legal Guardian

I have read and provide consent for ______________ to work in research laboratory ______

Name of High School Student

room/building at Penn.

I understand that he/she will be directly supervised at all times by ______________

Name & Title

____________________________________
Signature  Date