

Hazard Identification and Risk Management Form Undergraduate Research Activities

Working with the faculty member who will serve as their primary supervisor, undergraduate students must complete and have this form signed by their supervisor prior to conducting research activities.

A new copy of the form must be completed if additional activities with hazards not previously documented are planned.

Email completed forms to Leanne Lucas, Safety Advisor–Science Activities: leanne.lucas@smu.ca

Students and supervisors are welcome to consult with Leanne when completing this form.

1. Student Information

Student Name:	
A#:	
Student Email:	

Supervisor:	
Department:	

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Planned dates of your research activities:				
Start date:		End date:		

2. Briefly describe the research that you will be conducting.

3. Describe the hazards associated with your planned research activities. A hazard is anything that has the potential to cause harm to people or property (equipment, facilities). For additional information, see Chapter 3 of Saint Mary's <u>OHS Program Manual</u>.

4. Risk is the probability that a hazard will result in harm multiplied by the severity of that harm (risk = probability of harm X severity of harm). Describe the mitigation strategies that will be used to eliminate or minimize the level of risk associated with each of the hazards listed above.

5. Student Acknowledgement

I have discussed the research to be undertaken with the faculty member who will be my primary Supervisor. I understand the hazards described above, and with the mitigation strategies to be implemented am comfortable with the level of risk associated with my planned activities. I understand that I have a right to refuse any work that I feel is unsafe. I am comfortable with, and accept all risks associated with my planned activities.

Student Name	
Student Signature	
Date	

6. Supervisor Acknowledgement

I am aware of the planned research activities that the student will be undertaking. I have discussed the hazards associated with these research activities with the student. The mitigation strategies detailed are appropriate, and reduce the level of risk associated with each hazard to an acceptable level.

I will ensure that any required PPE is available to the student. For any hazardous substances used or handled, I will ensure that the student has read and understands all relevant Safety Data Sheets (SDSs), is aware of proper storage and disposal procedures, and spill and clean-up procedures.

I will ensure that the student receives appropriate training and operates under appropriate supervision.

Supervisor Name	
Supervisor Signature	
Date	

7. Safety Advisor Acknowledgement

This Hazard Identification and Risk Management Form has been received and reviewed. If necessary, follow-up with student and/or supervisor has been initiated.

Safety Advisor Name	
Safety Advisor Signature	
Date	