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 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

	and by my signature below agree that I have read,
_	nool Student Name
	o the Penn Policy on High School Students working in laboratories
He/she will be directly superv	vised at all times by
	Name & Title
Name of PI/Sponsor	
Signature	 Date
Signature	Date
Student	
	cy on High School Students working in laboratories in order to and me from an accidental exposure.
Name of High School Student	
Signature	Date
Parent/Legal Guardian	
I have read and provide conse	ent 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 byName & Title
Signature	

Revised 04-08-2013 2