

## Field Research Project Safety Plan and Risk Assessment Form

### Instructions:

1. Complete the following information as applicable to your field research project. Attach additional pages if necessary.
2. Upon completion of this form, it should be signed by the Principal Investigator and submitted to **Environmental Health & Safety at OCB 1.330.**
3. Environmental Health & Safety will review this risk assessment and provide feedback on appropriate controls to be implemented.

(not on trip):                      Contact \_\_\_\_\_  
Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Geographic location(s): \_\_\_\_\_  
Proposed start and end dates:    Start: \_\_\_\_\_ End: \_\_\_\_\_

### Team member details (including PI):





**Physical Activities:**

Physical demand	Potential risks	Risk controls in place

**Chemicals:**

**Travel and Task Specific Immunizations/Prophylaxis:**

**Emergency Procedures:**

**Principal Investigator Signature:**

**Training Documentation**

Sign here to verify you have read this Field Safety Plan, understand its contents and agree to comply with the requirements

Name/Phone Number	Signature	Date	Emergency Contact/Phone Number