**WORKPLACE SAFETY STATEMENT FOR MINORS AND NON-EMPLOYEES\* AT DUKE**

***\*****This form does not apply to and is not required for* ***currently*** *enrolled Duke Students.*

*Email completed form to* *safety@mc.duke.edu**.*

The Duke Sponsor(s) and location must be in compliance with the[Duke Policy for Minors/Non-Employees in Work Areas](http://www.safety.duke.edu/sites/default/files/I_6MinorsNon-Employees.pdf). Other policies that may apply: [Visiting Research Scholars](https://dosi.duke.edu/external-collaborations/visiting-research-scholars), [Minors in Duke Programs](https://hr.duke.edu/policies/expectations/minors-duke-university-programs), and [Volunteers/Unpaid Interns](https://hr.duke.edu/policies/hiring/volunteer-unpaid-intern-policy-guidelines).

OESO will review the information provided and may contact the sponsor with questions. If the work can be approved, OESO will note any requirements or restrictions at the end of the form, under the OESO approval signature.

1. **Sponsoring Program Contact Name, Emergency Phone Number, and Email:** (*i.e. contact for ProjectSEED, etc.*)

Click or tap here to enter text.

1. **Immediate Supervisor/ Mentor / Sponsor(s), Phone Number, and Email**: (*i.e. Graduate Student, researcher, etc.)*

Click or tap here to enter text.

1. **Principal Investigator, Phone Number, and Email:** (*required for research lab placements)*

Click or tap here to enter text.

1. **Location(s) where individual will work:** (*Department, Building, Room Number(s))* *Laboratories must be compliant with current safety audit.*

Click or tap here to enter text.

1. **Name(s) (and, for Minors, AGE(S)):**

Enter the Name(s) of Minor(s)/Non Employee(s) and AGE(S) of Minor(s).[ ]  **Person(s) listed is/are < age 18**

1. **Dates when they will be in the workplace**: From: Click or tap to enter a date. To: Click or tap to enter a date. Click or tap here to enter comments.
2. **Describe reason for being in the workplace and expected tasks**:

Click or tap here to enter text.

[ ]  **The Non-Employee or Minor will ONLY be observing. (No activities performed by the non-employee or minor). STILL COMPLETE #8 and 9 to list hazardous materials or processes the person will be observing.**

1. **Identify any physical hazards to which the individual may be exposed:** *(Examples: autoclaves, Bunsen burners, radiological materials, radiation-producing equipment, lasers, or machine tools)*
2. **List the chemical and biological materials, chemical C.A.S. numbers or other identifiers (listed on containers and safety data sheets), and the planned use for the materials. Please add rows as needed or attach a separate sheet.** *NOTE*: *Review restrictions on materials and equipment with which minors and non-employees may work in the* [Duke Policy for Minors/Non-Employees in Work Areas](http://www.safety.duke.edu/sites/default/files/I_6MinorsNon-Employees.pdf). For guidance, email labsafety@duke.edu or call OESO 919-684-8822.

| Chemical/Biological Material | CAS No. or other identifier;  | Concentration and quantity | Planned use of material(s) |
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**Supervisor’s Statement of Mentorship/Sponsorship:**

I confirm that the individuals under my mentorship or sponsorship will be supervised. Minors will be supervised at all times. For individuals who will be in research labs, one of the supervisors below must be the principal investigator.

Supervisor Printed Name Date: Enter date.

 Supervisor Signature

Supervisor Printed Name Date: Enter date.

 Supervisor Signature

**OESO Approval:**

**OESO RESTRICTIONS AND REQUIREMENTS WILL BE LISTED BELOW WHEN FORM IS APPROVED**