

INSTITUTIONAL BIOSAFETY COMMITTEE (IBC) APPLICATION TO CONDUCT RECOMBINANT DNA EXPERIMENTS

Directions: This application is to be submitted to and approved in writing by the IBC *prior* to the initiation of any investigation involving rDNA on the campus of Hobart & William Smith Colleges. For timely review, we request that you please submit this form no later than January 1 or July 1 for review at semi-annual IBC meetings. Please submit a signed, paper copy and an electronic version of your application to the Office of Academic and Faculty Affairs (switzer@hws.edu).

Principal Investigator Name: HWS Department Affiliation: Campus Address: Email Address: Phone Number:

If Principal Investigator is a Research Associate:

Name of Faculty Supervisor: Supervisor's Campus Address: Supervisor's Email Address: Supervisor's Phone Number:

Note: Supervisor's signature must appear at the end of this form.

Project Short Title:

Anticipated Starting Date of Experiments:

Project Involves:

Faculty/Staff research Independently conducted student research Undergraduate coursework Other:

Project Collaborators: (Indicate institutional affiliation if non-HWS)

For IBC use only:	Protocol # :		
	Submission Date:		
Approved Not approved	Revision Date:		
Print Chair's Name	Chair's Signature	Date	

Nature of the Research

<u>1. Purpose of the investigation</u> – provide a brief summary of the research and/or teaching activities in nontechnical language.

Specifics about the Research

Please review the NIH guidelines for research involving rDNA at: http://oba.od.nih.gov/oba/rac/Guidelines/NIH_Guidelines.htm.

1. Prokaryotic Cells:Will the described experiment(s) use (or be carried out in) E. coli or another
prokaryotic host? \Box Yes \Box No

If yes, please provide the following information:

Host Strains:

What type of vectors are used (include a brief description and source of the vector(s)) :

Inserted DNA (include common name, genus, species, gene name and abbreviation)

Are you planning on cloning a whole virus or provirus?

If yes, please provide the following information:

NIH Guideline Section:

Recommended Biosafety Level:

2. Eukaryotic Cells: Will the described experiment(s) be carried out in eukaryotic cells?

If yes, please provide the following information:

Host Strains:

 \Box Yes \Box No

What type of vectors are used (include a brief description and source of the vector(s)) :

Inserted DNA (include common name, genus, species, gene name and abbreviation)

Helper virus or packaging cells if used?

Please indicate the fraction of eukaryotic viral genome that is contained in the rDNA molecules:

$\Box < 1/2$	\Box >1/2 but <2/3	$\Box > 2/3$

NIH Guideline Section:

Recommended Biosafety Level:

 $\Box > 2/3$

<u>3. Hosts:</u> Will whole plants or animals be used as hosts for the experiment(s)? \Box Yes \Box No If yes, please provide the following information:

Plant or Animal:

What type of vectors are used (include a brief description and source of the vector(s)) :

Inserted DNA (include common name, genus, species, gene name and abbreviation)

Please indicate the fraction of eukaryotic viral genome that is contained in the rDNA molecule:

 Will transgenic plants or animals be constructed or used?

 \[
 \]
 Yes
 \[
 \]
 NiH Guideline Section:

Recommended Biosafety Level:

Scientific Description of Experiment(s)

 $\Box < 2/3$

Please indicate the scientific basis of the experiment(s) to be carried out. Be sure to include sufficient details and also include references where appropriate.

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Location

Please complete the following table that describes where experiments will take place:

Building and Room #	Biosafety Level	Room Use	Safety Equipment Present

Biohazard Potentials

Explain briefly the potential biohazards for the experiments that will be conducted on campus.

Training and Safety

The Principal Investigator will be responsible for the training of all laboratory workers (students, lab technicians, research personnel, etc) involved in the research that is carried out. All parties should understand the potential biohazards and relevant biosafety practices, techniques and emergency procedures applicable to the experiments that they will be conducting.

In the case of any research related accidents, exposure or release of rDNA to the environment, or violations of NIH Guidelines, written reports will be submitted to the IBC, the Provost, and Sponsored Research Office *within one week* of the incident.

Assurance Statement

I agree to follow the practices outlined above and confirm that the procedures that are described are accurate and will be followed in the course of the research activities proposed.

Signature of PI

Date