



THIS FORM IS TO BE FILLED OUT FOR ALL WORK DONE IN LAB FACILITIES

Part A – Project Plan (to be completed by the researcher):

Project Title:	
Proposed by (project leader):	DATE
Approved by (Faculty):	DATE

Purpose:

Description: *Detailed description of project and requirements (equipment, staff, materials, facilities, etc). (Attach reference documents).*

Safety: Safety is everyone’s responsibility and must be considered in all tasks. Low risk activities are defined as those that entail hazards no greater than those typically encountered in every day life, (travel to conferences, working in office type environment, etc). Medium/High risk activities could include: Working with dangerous gases or chemicals, using high voltage electrical equipment, working from elevated heights, etc

Potential Hazards Involved in Project: (check appropriate box)

	Yes	No		Yes	No		Yes	No
Chemicals (note #2)	<input type="checkbox"/>	<input type="checkbox"/>	Elevated Heights (note #4)	<input type="checkbox"/>	<input type="checkbox"/>	Sufficient Workspace	<input type="checkbox"/>	<input type="checkbox"/>
Pressurized Systems	<input type="checkbox"/>	<input type="checkbox"/>	Dust/Gases	<input type="checkbox"/>	<input type="checkbox"/>	Falling Material	<input type="checkbox"/>	<input type="checkbox"/>
Fire/Explosion	<input type="checkbox"/>	<input type="checkbox"/>	Mechanical Machinery	<input type="checkbox"/>	<input type="checkbox"/>	Isolation (note #6)	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Systems	<input type="checkbox"/>	<input type="checkbox"/>	Fieldwork (note #5)	<input type="checkbox"/>	<input type="checkbox"/>	Physical Overexertion	<input type="checkbox"/>	<input type="checkbox"/>
Radiation (note #3)	<input type="checkbox"/>	<input type="checkbox"/>	Enclosed Spaces	<input type="checkbox"/>	<input type="checkbox"/>	Use of lasers (note #7)	<input type="checkbox"/>	<input type="checkbox"/>

Other: _____

- Notes:
1. If project involves any med/high risks, attach completed form *FRM000002 Project Safety Plan*.
 2. Projects involving use of chemicals must include safety consultation with a lab manager.
 3. See <http://riskmanagement.ubc.ca/health-safety/radiation-safety> for radiation safety requirements.
 4. If project involves work at elevated heights, consult lab manager, project may require form *FRM000012 Fall Prevention Plan*.
 5. If project involves fieldwork, attach completed form *FRM000013 Fieldwork Safety Plan*.
 6. See <http://riskmanagement.ubc.ca/health-safety/working-alone> for information about working alone. A formal risk assessment and procedure will need to be developed before working in isolation.
 7. See <http://riskmanagement.ubc.ca/health-safety/laser-safety> for information on the UBC laser safety program.



Safety (cont'd)

Risk Reduction/Elimination:

Standard Procedures	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Work Area Kept Clean	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Hard Hat	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Fall Protection Plan	<input type="checkbox"/>	<input type="checkbox"/>	Fieldwork Plan Required	<input type="checkbox"/>	<input type="checkbox"/>	Safety Glasses	<input type="checkbox"/>	<input type="checkbox"/>
Safety Plan Required	<input type="checkbox"/>	<input type="checkbox"/>	Hazard Assessment (note #2)	<input type="checkbox"/>	<input type="checkbox"/>	Safety Shoes	<input type="checkbox"/>	<input type="checkbox"/>

Other: _____

Notes:

- Before starting any tests/activities, a lab manager must review/ inspect, and give authorization to proceed.
- A lab manager may require a formal hazard assessment (procedure *PRC000002*) before test/activity begins.

Safety and Environmental Hazards and risk reduction/elimination procedures:

Quality Controls: Describe the quality control measures to be used to ensure data quality.

Part B – Finance Info (to be completed by Faculty : mandatory items = highlighted):

Speedchart for expenses (mandatory):	ACCOUNT	SIGNATURE
Maximum staff hours (optional):	AMOUNT	SIGNATURE
Pre-authorize purchases up to (optional):	AMOUNT	SIGNATURE

Part C – Compliance Information (to be completed by a lab manager/lab supervisor):

The project plan includes resources and timing for proper disposal of test material	
The project plan has reasonable timing and adequate resources	
A safety review of the proposed project has been done and there is a plan to address all known issues. A project safety plan is attached (if required). The researcher and sponsor are aware of any hazard reviews required at any stage.	
Data quality controls have been addressed (calibration, standards, etc) and a data archival procedures/location has been established	
Approved by Lab Manager/Supervisor:	SIGNATURE