

The University of Texas at El Paso

**Institutional Biosafety Committee**

**Personnel Amendment Form**

*Instructions:* Forms need to be completed and submitted via [IRBNet](http://www.irbnet.org/) prior to new lab personnel working on the approved protocol. Required training for newly added lab personnel should be completed prior to submission of this form. Any questions contact the IBC office at [ibc@utep.edu](mailto:ibc@utep.edu).

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| **PROJECT INFORMATION:** | |
| Principal Investigator |  |
| Project Title: |  |

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| **Personnel added to the project:**  *Please list the names of the individuals who will be covered under this protocol. Include their full name, check off their role in the study, and include their UTEP e-mail address.* |

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| **Project Team Members – Identify each current person involved in the design, conduct, or reporting of the research** | | | | | | | | |
| **Name:**  *First and Last Name* | **E-Mail:**  *Mostly used* | **Team members role on the Project:**  1. Principal Investigator 2. Co-investigator  3. Student 4. Faculty  5. Staff 6. Outside Collaborator  **Check all that apply** | | | | | | |
| **1** | **2** | **3** | **4** | **5** | **6** | **Experience:** |
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| **IMPORTANT:** If project personnel is greater than 5 individuals, please add additional rows. | | |
| **1.8 Has your staff read the entire protocol?** | YES |  |
| NO |  |
| **1.9 Have you educated your staff regarding safe handling and decontamination procedures for all of the agents or materials listed in the protocol?** | YES |  |
| NO |  |

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| **Personnel removed from the project:**  *Please list the names of the individuals who are no longer involved in this protocol and needs to be removed. Include their full name, email, and reason of removal.* |

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| **Project Team Members – Identify each current person involved in the design, conduct, or reporting of the research** | | |
| **Name:**  *First and Last Name* | **E-Mail:**  *Mostly used* | **Removal reason:**  *(ex. Left the lab, graduated, etc.)* |
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