ANIMAL HANDLERS FORM (Independent Study Students) - Personal Profile for Independent Study Students

Directions: Use this form when students will be working with animals or animal tissue as part of an independent study. Independent study students should be made aware of potential hazards involved in working with animals and reference the University of Connecticut Occupational Health and Safety Program for Animal Handlers. The independent study student should also be made aware of the recommended immunizations for the species they are working with. Independent studies are academic experiences under the direction of an instructor and as such responsibility for training the student and instructing them about potential hazards is the responsibility of the sponsoring faculty/instructor. Recommended or required immunizations may be considered a class requirement and the responsibility of the student, consult with your faculty sponsor/instructor. Maintain this form in the Environmental Health and Safety files for animal handlers. Each form can cover up to two semesters.

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Semester(s) Net ID			Faculty Spor			sor/Instructor		
Name(First) Dept	*	(Middle)		ast)		Work Phone		
	Animal Con	tact Profile – chec	ck species	worked v	vith here	at UConr	1	
Rodents	odents Sheep/goats*		Fish/amphi					
Rabbits	Cattle	Poultry/birds		Wildlife (specify)				
Cats	Pigs	Reptiles						
Other (specify	, e.g., necropsy only, obs	ervation only)						
VACCINATI	ONS/TESTS - Plea Vaccine	se indicate below Mo/Yr		en you ha		ne followi	ng vaccinations	
	id	1120/12						
*Individuals wit with animals, es	th compromised immur pecially sheep or goats. a history of animal allo	ne systems and/or hea						
I have answered thandler safety can be deleterious to prior to beginning	the questions in this form n be found in the Occupate the laboratory animals. It gany work with animals zations or serology.	n truthfully and to the lational Health and Safe I understand that it is n	best of my kr ety Program to my responsib	owledge. I for Animal ility to return	am aware the Mandlers. If the comple	hat further i do not have ted copy of	nformation on animal any malady that would this form to EH&S	
			(Date)					
(Faculty Sponsor/Instructor Signature) Return original form to EH&S prior to beginning any animal work. EH&S				0.C 2102 I	(Date)			

Last reviewed 7/2023

486-1106) or email to EHS@uconn.edu