

**FAU College of Medicine**  
**Student/Volunteer Access and Training Form**  
To be filled out by PI.

This form serves to document what access and training is required prior to any student or volunteer participating in activity in a research laboratory, classroom laboratory, or clinic. Please submit form (type or print clearly) and all training certificates to Melanie Weiss at [mweiss@health.fau.edu](mailto:mweiss@health.fau.edu), 561-297-4557.

Name of Primary Investigator or Faculty: \_\_\_\_\_

Title of PI's Project: \_\_\_\_\_

Grant # supporting research activities: \_\_\_\_\_

Name of Student or Volunteer: \_\_\_\_\_

Student/Volunteer Email and Phone: \_\_\_\_\_

Z Number: \_\_\_\_\_

Med Student

PhD Student

MS Thesis Student

DIS Graduate # of credits: \_\_\_\_\_

DIS Undergraduate # of credits: \_\_\_\_\_ Minor? Y N Dual Enrolled? Y N

FAU Volunteer Minor? Y N Dual Enrolled? Y N

Non-FAU Volunteer Minor? Y N Dual Enrolled? Y N

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**Volunteer Information:** All volunteers will undergo a background check.

• Non-Minors: For both FAU and Non-FAU Volunteers, complete two forms below:

o <http://www.fau.edu/leadandserve/pdf/volunteer-risk-waiver.pdf>

o <http://www.fau.edu/leadandserve/pdf/volunteer-registration.pdf>

• Minors: All volunteers under the age 18, complete forms below:

o <http://www.fau.edu/leadandserve/pdf/volunteer-risk-waiver.pdf>

o <http://www.fau.edu/leadandserve/pdf/volunteer-registration.pdf>

o <https://www.fau.edu/leadandserve/pdf/treatment-minors.pdf>

o [http://www.fau.edu/our/Minors\\_in\\_Labs\\_Policy\\_and\\_Procedures\\_Final.pdf.pdf](http://www.fau.edu/our/Minors_in_Labs_Policy_and_Procedures_Final.pdf.pdf)

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**Section 1: Regulatory and Compliance Requirements**

**Will the student be participating in any activity involving the following? Mark all that apply.**

Human cells / Cell lines Y N If yes, IBC approval #: \_\_\_\_\_

Recombinant DNA Y N If yes, IBC approval #: \_\_\_\_\_

Visit <http://www.fau.edu/facilities/ehs/info/Biosafety-Committee-Registration.pdf> if you have questions about when IBC approval is required.

Bloods/Other bodily fluids Y N If yes, bloodborne pathogen training will be required, see below.

Radioactive Isotopes Y N If yes, radiation safety training will be required, see below.

- Human Subjects                      Y N    If yes, IRB approval #: \_\_\_\_\_  
 Visit <http://www.fau.edu/research/research-integrity/do-i-need-irb.php> or call 561-297-1383 if you have questions about human subjects research and when IRB approval is required.
- Animal use                                Y N    If yes, IACUC approval #: \_\_\_\_\_  
 Visit <http://www.fau.edu/research/research-integrity/about-iacuc.php> or call 561-297-4992 if you have questions about working with animals and when IACUC approval is required.

**Please give a brief description of the specific responsibilities of the student/volunteer:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**NOTE:** It is the PI/Faculty’s responsibility, prior to the start of activity, to process an amendment and add the student/volunteer to their IRB/IBC/IACUC protocols when relevant.

**Section 2: Training Requirements**

All students/volunteers must complete the following trainings, regardless of their specific research activities:

**FAU HIPAA Training**

- Module 1- HIPAA Security Rule for Covered Entities
  - Module 2-HIPAA Privacy Essentials
- Visit <http://www.fau.edu/hipaa/training.php> to initiate HIPAA training. Screenshot your completion certificates. Date completed: \_\_\_\_\_

**CITI Responsible Conduct of Research (RCR) Training**

- This training must be renewed every three years. To access the course, follow these steps:
1. Go to [www.citiprogram.org](http://www.citiprogram.org)
  2. As a new user, you will need to click Register Here to register for the training course.
  3. Select “Florida Atlantic University” from the Participating Institutions and click submit.
  4. Create a unique username and password and click “submit”.
  5. Enter your personal information (first name, last name, e-mail) and click submit.
  6. Continue entering additional information (gender, degree, etc.) and click submit.
  7. Choose RCR module to complete.
- Save a copy of your training certificate. Date completed: \_\_\_\_\_

**Laboratory Safety and Hazardous Waste Training**

This training is completed online via Canvas and must be renewed annually. Visit <http://www.fau.edu/facilities/ehs/training/selfenroll.php> to self-enroll.  
 Note: the course says Refresher but you can take for your original training.  
 Save a copy of your training certificate. Date completed: \_\_\_\_\_

**Additional Trainings**

Below are additional trainings that might be required based on your research activities (you will need to complete these if the PI circled yes in Section 1). Save copies of training certificates.

- **Bloodborne Pathogens Training**      Date completed: \_\_\_\_\_
- **Radiation Safety Training**              Date completed: \_\_\_\_\_

Visit <http://www.fau.edu/facilities/ehs/training/selfenroll.php> to self-enroll.

- **Human Subjects Training-** In addition to the CITI RCR module mentioned above, you will need to complete additional modules if working with human subjects. You will select the most relevant module to your research discipline. The choices are: 1) Biomedical Research Investigators, 2) Social & Behavioral Research Investigators or 3) Data or Specimens Only Research. Save a copy of your training certificate; this training must be renewed every three years. Date completed: \_\_\_\_\_

- **Animal Training**- There are multiple steps for personnel to work with animals including online and in person trainings. Visit <http://www.fau.edu/research/research-integrity/animal-research-mandatory-training.php#collapseTwo> for a complete list of requirements, including the CITI program animal module.
    - IACUC mandatory training: Contact Helen Munchow at [amunchow@fau.edu](mailto:amunchow@fau.edu)
    - Vivarium mandatory training: Contact Carrie List at [clist@fau.edu](mailto:clist@fau.edu)Date completed: \_\_\_\_\_
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### **Section 3: Personal/Academic Management Plan**

Predicted Start Date: \_\_\_\_\_ Predicted End Date: \_\_\_\_\_  
Title of Student's DIS or Thesis Project: \_\_\_\_\_  
# of credit hours: \_\_\_\_\_  
Direct Supervisor: \_\_\_\_\_  
If there is a secondary supervisor involved, please list name and role: \_\_\_\_\_  
Will this person be under constant supervision? Y N

**Note:** Any change in project scope requires a new form.

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### **Office Use Only**

- HIPAA training-Date completed: \_\_\_\_\_
  - CITI RCR training-Date completed: \_\_\_\_\_
  - Lab Safety/Hazardous Waste-Date completed: \_\_\_\_\_
  - Bloodborne Pathogens training-Date completed: \_\_\_\_\_
  - Radiation Safety-Date completed: \_\_\_\_\_
  - Other: \_\_\_\_\_ Date completed: \_\_\_\_\_
  - Other: \_\_\_\_\_ Date completed: \_\_\_\_\_
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### **Access**

FAU Volunteers & Non-FAU volunteers are only permitted to receive 8am-5pm weekday access. MD, PhD, Master Thesis, DIS Undergraduate and Graduate are permitted to receive 24/7 access.

- Weekdays 8am-5pm access
- 24 hour / 7 days a week access

### **Requested access:**

- Building Entrances
- Common Labs
- PI Lab

### **Approvals:**

PI Signature and Date: \_\_\_\_\_  
Student/Volunteer Signature and Date: \_\_\_\_\_  
Asst Dean of Graduate Program Signature and Date: \_\_\_\_\_  
Attending Veterinarian Signature and Date: \_\_\_\_\_  
Senior Associate Dean for Research Signature and Date: \_\_\_\_\_