

Date: March 30, 2019

RE: Consent to Participate and Acknowledgement of Risk and Release Form for Tours and Programs involving Laboratories



Dear Parent or Legal Guardian:

This Consent to Participate and Acknowledgement of Risk and Release Form (Form) is required for the referenced participant (Participant) on said Form prior to participation in an educational tour (Tour) or program (Program) at Tulane University referenced on Form, which may involve activities within a learning facility (i.e. Makerspace) and/or research laboratory in the following School/Department. Participation will be under the direct supervision of the individual referenced below in the Tulane University Building and/or Laboratory as follows:

School/Department Name: School of Science and Engineering (SSE)

Direct Supervision Provided By: Faculty, graduate, and undergraduate student facilitators and chaperones

Tulane University Building and/or Laboratory: Uptown campus laboratories and classrooms

Individual learning facilities or research laboratories vary in the inherent types of potential hazards present. The Participant may be exposed to these hazards as indicated within the designated checked box below:

Tour Participants and short-term observers may only participate in laboratory activities involving supervised demonstrations, such as viewing microscope slides, handling plastic models, providing demonstrations of non-hazardous lab equipment, and providing demonstrations of behavioral testing of animals with minimal handling by participants under direct supervision and with assistance, as permitted under the Institutional Animal Care and Use Committee (IACUC) guidelines. Tour Participants and short-term observers will be provided a lab safety orientation prior to participating in the laboratory activities described herein.

Program participants may be working with or around animals, biological materials, chemicals or other potentially hazardous material and under the direct supervisor referenced above. Programs for minors in laboratories are viewed by the Tulane University Office of Environmental Health and Safety (OEHS) to confirm that the Program(s):

1. Is appropriate for minor Participants.
2. Has appropriate safety precaution in place.
3. Has identified training requirements.
4. Requires Supervisors complete the training requirements for Participants before the lab activity begins.

Makerspace-Program participants using learning facilities for this Program will be using the Makerspace, which includes working in a room, which also contains heavy equipment/machinery. While participants are expressly **prohibited** to operate such equipment, or even be in the vicinity of such equipment while it is being operated by others, the mere presence of heavy equipment/machinery has potential to create safety hazards. Participants may use 3D printers and laser cutters with plastic, cardboard, and pre-cut plywood under proper supervision. A separate Acknowledgement of Risk Form is required for use of Makerspace.

This Tour or Program entails a field trip involving travel to and from

Participants may be working with or around animals, biological materials, chemicals, or other potentially hazardous materials. As a part of projects within the Tour or Program, the Participant will work with or perform the following:

Description of Proposed Laboratory Activities (include any potentially hazardous materials or animal research):
mild, household non-toxic chemicals such as rubbing alcohol, hydrogen peroxide, and mild detergent; holding a hissing cockroach, tarantula, or leech (all of these are completely OPTIONAL); viewing of animals in protected cases; preserved specimens including brains (wearing laboratory gloves), fish, and bones; using the gas from dry ice (wearing laboratory gloves); electronics

Participants who may work with or in the vicinity of potentially hazardous materials will be required to attend laboratory safety training, and may also be required to attend additional training sessions, depending on the nature of the Participant's particular project. If you have further question on these topics, please call the Program Director or an OEHS Safety Program Manager at (504) 988-2800.

Program Director Name: Dr. Michelle Sanchez and Nicole Moody
Contact Information: k12stem@tulane.edu, 504-314-2932

CONSENT TO PARTICIPATE AND ACKNOWLEDGEMENT OF RISK AND RELEASE FORM

In consideration of the opportunity to allow participation of _____ (the "Participant") in Girls in STEM at Tulane (GiST) (the "Tour" or "Program") at Tulane University (the "University"), the undersigned (parent/guardian), hereby acknowledges and agrees as follows:

I acknowledge that activities conducted in the course of the Tour or Program may entail known or unanticipated risks which could cause harm to me or third parties or damage to property. I understand that University facilities and/or laboratories are being made available to Participant as an educational opportunity and that Participant is not a matriculated student, employee, or affiliate of University. I understand that University laboratories may contain chemicals as described on page one (1) and equipment and may involve animal research activities. As a result of these exposures and activities, I understand that Participant may be subjected to potential risks that could result in illnesses or injuries. If this Tour or Program entails field trips involving transportation to and from, I grant permission for the Participant to engage in said field trips.

In addition, the Participant and the undersigned understand and agree:

1. _____ to the risks associated with the activities of the Tour or Program and accept and assume all risks and liabilities associated with participation in the Tour or Program.
2. _____ that participation in the Tour or Program is purely voluntary.
3. _____ that if the University obtains any recorded medium (including but not limited to video, audio, photos) of Participant engaging in Tour or Program activities in any form (including but not limited to print, websites, blogs, internet) that such recorded medium of Participant's name, likeness, voice and biographical material may be used by University to exhibit or distribute in whole or part for educational and promotional purposes of Tour or Program and that Participant or the undersigned waives the right to inspect or approve the recorded medium as well as waiving any royalty and compensation rights related to the use of such recorded medium.
4. _____ that the University will not administer any medications to Participant and that the undersigned will make arrangements with the University to come to the location of the activities and administer any required medications.
5. _____ that the University will not be responsible for the drop off and/or pick up of the Participant, including verification that individuals dropping off/picking up Participant are indeed the custodial Parent or Guardian of Participant.

The undersigned certifies that Participant has no medical or physical conditions which could interfere with Participant's safety or the safety of others in connection with participation in the Tour or Program, and hereby assumes and agrees to bear the costs of all risks that may be created, directly or indirectly, by any such condition, whether or not disclosed to the University. In addition, in the event of an emergency and medical treatment is deemed necessary, the undersigned and Participant authorizes emergency medical treatment by an attending physician and/or emergency responders and assumes responsibility for costs associated with such emergency medical treatment.

THE UNDERSIGNED, OR A REPRESENTATIVE ACTING ON BEHALF OF THE UNDERSIGNED OR A PARENT/GUARDIAN FOR MINORS, AND PARTICIPANT HEREBY AGREES TO RELEASE, DEFEND, INDEMNIFY HOLD HARMLESS, AND FOREVER DISCHARGE THE ADMINISTRATORS OF THE TULANE EDUCATIONAL FUND, ITS ADMINISTRATORS, TRUSTEES, OFFICERS, FACULTY, STAFF, AGENTS AND OTHER REPRESENTATIVES (COLLECTIVELY, "THE UNIVERSITY"), ON BEHALF OF MYSELF, MY CHILDREN, MY PARENTS, MY HEIRS, ASSIGNS, PERSONAL REPRESENTATIVES AND ESTATE FROM ANY AND ALL CLAIMS, DEMANDS OR CAUSES OF ACTION WHICH IN ANY WAY RELATE TO OR ARISE OUT OF MY PARTICIPATION IN THE PROGRAM OR MY USE OF THE UNIVERSITY'S EQUIPMENT OR FACILITIES, REGARDLESS OF WHETHER CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY NEGLIGENT ACTS OR OMISSIONS OF THE UNIVERSITY.

In the event the undersigned, or a representative acting on behalf of the undersigned, or Participant engages in a lawsuit against the University for participation in the Tour or Program, the undersigned agrees to file suit solely in the state of Louisiana and further agrees that the substantive law of Louisiana (without regard to its conflict of law provisions) shall apply in any such action. The undersigned agrees that if any portion of this agreement is found to be void or unenforceable for any reason, the remaining portions shall remain in full force and effect. **I have read this Consent to Participate and Acknowledgement of Risk and Release in its entirety. I understand it and I agree to be bound by its terms. I certify that I am the legal Parent/Guardian of Participant.**

Parent/Guardian Signature: _____ Printed Name: _____ Date: _____

Emergency Contact Info #1 (Name/Phone): _____

Emergency Contact Info #2 (Name/Phone): _____

Pediatrician/Physician Contact Info (Name/Phone): _____

COMPLETE THIS SECTION ONLY FOR PROGRAMS. TOURS ARE EXEMPT.			
SAFETY TRAINING MUST BE COMPLETED PRIOR TO BEGINNING ACTIVITIES WITHIN THE LABORATORY			
I acknowledge that I must receive the Safety Training for Minors, Student Learners and Non-Employee Visitors/Observers in Laboratories prior to being permitted to participate in Program or lab activities. By signing below, I certify that I have received such training and that I will comply with the safety rules provided to me. If I do not comply with the safety rules, my participation in Program or within the laboratory may be terminated.			
Participant Signature:	N/A	Printed Name:	N/A
		Date:	N/A

Tulane University Human Research Protection Office
Social/Behavioral IRB Parent Permission Form for Participation in a Research Study
Girls in STEM

Principal Investigator: Dr. Laurie O'Brien

Co-Investigator(s): Sally Merritt

Study Title: Girls in STEM

The following permission form is required by Tulane University for any research study conducted by investigators at the University. This study has been approved by the University's Institutional Review Board for Human Subjects.

Introduction

Your child is invited to participate in a research study to examine girls' interest in science. She is being asked to participate because she is participating in Girls in STEM at Tulane (GiST). No research activity is to be conducted until you have had an opportunity to review this permission form, ask any questions you may have, and sign this document if applicable.

Why is this study being done?

The purpose of this research study is to examine how participating in educational science outreach events with female role models like GiST influence girls' attitudes about science.

What are the study procedures? What will your child be asked to do?

If you agree to let your child take part in this study, then she will be asked to fill out a short questionnaire examining her attitudes towards science. She will complete this questionnaire as part of the GiST program on Tulane University's campus. The total number of participants to be enrolled is 300.

What other options are there?

If your daughter does not participate, she will be given a short reading article on science. She can participate in GiST regardless of whether or not she participates in this study.

What are the risks or inconveniences of the study?

We do not believe there are any risks associated with participating in this study. We will take precautions to make sure that your daughter's responses remain confidential.

What are the benefits of the study?

The information obtained from this study will help teachers, policy makers, counselors and school administrators design curriculum and interventions to increase girls' educational outcomes in science.

Will I receive payment for participation?

You will not be paid to be in this study.

Are there costs to participate?

There are no costs to you to participate in this study.

Version Date: 10/26/18

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Subject Initials: _____

Tulane University Human Research Protection Office
Social/Behavioral IRB Parent Permission Form for Participation in a Research Study
Girls in STEM

How will my child's personal information be protected?

We will take precautions to keep your daughter's responses confidential. The questionnaires will be stored in a locked filing cabinet in Dr. O'Brien's secure laboratory. Your daughter will not be asked to write her name on any materials associated with this study. Your permission form will be stored in a separate location from your daughter's questionnaires.

You should also know that the Tulane University Human Research Protection Office, Social/Behavioral Institutional Review Board (IRB) and/or the Office of Research Compliance may inspect study records as part of its auditing program, but these reviews will only focus on the researchers and not on your responses or involvement. The IRB is a group of people who review research studies to protect the rights and welfare of research participants.

Can my child stop being in the study and what are her rights?

Your daughter does not have to participate in this study if you do not want her to or if she does not want to. Even if your daughter does not participate in this study, she can still participate in GiST. If you agree to let her be in the study, but you or she later change your mind, she may drop out at any time. There are no penalties or consequences of any kind if you decide that you do not want her to participate. She does not have to answer any question that she does not want to answer.

Who do I contact if I have questions about the study?

Take as much time as you like before you make a decision to participate in this study. We will be happy to answer any question you have about this study. If you have further questions about this study, want to voice concerns or complaints about the research or if you have a research-related problem, you may contact the principal investigator, Dr. Laurie O'Brien, 504-862-3320. If you would like to discuss your rights as a research participant, discuss problems, concerns, and questions; obtain information; or offer input with an informed individual who is unaffiliated with the specific research, you may contact the Tulane University Human Research Protection Office at 504-988-2665 or email at irbmain@tulane.edu.

Documentation of Permission:

I have read this form and decided that I will allow my daughter to participate in the research project described above. Its general purposes, the particulars of involvement and possible risks and inconveniences have been explained to my satisfaction. I understand that I can withdraw at any time. My signature also indicates that I have received a copy of this permission form.

Child's Name

Parent/Legally Authorized Representative

Date