

Request to Continue Essential Research in on-campus research laboratories and facilities Form Lakehead University Thunder Bay and Orillia Campuses

Please send this form to the Vice-President, Research and Innovation only after it has been signed-off by your Faculty Dean.

A fully signed copy of this form should be kept and posted in your laboratory.

To be granted an exemption to the University's decision to restrict all on-campus research activity on the Thunder Bay and Orillia campuses, justification for the exemption, requires the approval of your Faculty Dean and Vice-President Research and Innovation. Please send this form **once signed by the Faculty Dean** to vpresearch@lakeheadu.ca. We will respond to the email address provided for the Principal Investigator below, cc: to the Dean and Director, Research Services.

The following criteria will be considered in the decision to grant the exemption:

- The nature of the project:
 - Does it involve COVID-19 research?
 - Does it involve maintaining critical research material that cannot otherwise be preserved (e.g., biological materials, living plant collections, etc.)?
 - Is this research that is at a critical stage or close to an end-point?
- Is the exemption being requested to allow you to take simple steps to sustain a collection, such as topping up liquid nitrogen stocks or moving samples into a more sustainable storage container?
- Will the number of people required to do the work be able to respect social distancing protocols?

Campus:	<input type="checkbox"/> Thunder Bay <input type="checkbox"/> Orillia
Name of Principal Investigator:	
Department/Faculty:	
Building/Room #'s:	
Email:	
Primary Mobile Phone Number:	
Title of Project:	
Personnel who will access the research facility: (list Principal Investigator first)	<p>Personnel #1: Mobile Phone Number: <input type="checkbox"/> Faculty member <input type="checkbox"/> Graduate student <input type="checkbox"/> Post-doctoral Fellow <input type="checkbox"/> Staff</p> <p>Personnel #2: Mobile Phone Number: <input type="checkbox"/> Faculty member <input type="checkbox"/> Graduate student <input type="checkbox"/> Post-doctoral Fellow <input type="checkbox"/> Staff</p> <p style="text-align: center;">All personnel who will be working on site under this exemption have completed All required H&S related training.</p> <p>NOTE: If only one person will be accessing the facility, please include the plan for ensuring that person's safety and security in the safety plan section of this form.</p>

Please provide the names of any approved, qualified personnel who may substitute for the named personnel on this form:

Please outline a safety plan for this project, including a safety plan if people are working alone below:

Approvals:

	Faculty Dean	Vice-President Research & Innovation
Signatures may be added using one of two formats as shown.	Signature:	Signature:
	Or click box to add scanned signature:	Or click box to add scanned signature:
	Name:	Name:
DECISION: <input type="checkbox"/> Approved <input type="checkbox"/> Declined		
Notes:		

PLEASE ENSURE APPROVALS AND SIGNATURES ARE OBTAINED FROM DEAN BEFORE SUBMITTING TO vpresearch@lakeheadu.ca