## Risk Assessment Form (3)

Must be completed before experimentation; recommended for all projects. May be required for projects involving Human Participants, Hazardous Chemicals, Materials or Devices or Potentially Hazardous Biological Agents.

Mazardous Biological Agents.
Student's Name(s)
Title of Project Which form of biodegradable hydrogels will help conserve irrigate water in the farming industry?
To be completed by the Student Researcher(s) in collaboration with Designated Supervisor/Qualified Scientist: (All questions must be answered; additional page(s) may be attached.)
1. Identify and assess the risks and hazards involved in this project.  Citric Azid is considered an eye irritant if chemical gets into or near eyes.  HEC Powder can cause navsea, vomiting, or dia rrhea if large amounts are consumed by an individual. (Small amounts will be used for experimentation).  2. a) List all hazardous chemicals, activities or devices to be used; b) identify and list all microorganisms to be used that are exempt from pre-approval (see Potentially Hazardous Biological Agent rules).
*Hydrox yethyl collisionse. Powder - (Small amounts will be used so these hazards sho not be an issue). No pisks a herards for small amounts (food product)  3. Describe the safety precautions and procedures that will be used to reduce the risks.  Safety Goggles - Eye protection.  Glores - Hand protection  Apron - Spill protection for body.  Heat-protective gloves - Protecting hands from heat of the hot plate  1. Describe the disposal procedures that will be used (when applicable).  #2ba - Solid Waste Disposal in Lanfill
. List the source(s) of safety information.  WWW. Flinnsci. com
To be completed and signed by the Designated Supervisor (or Qualified Scientist, when applicable): I agree with the risk assessment and safety precautions and procedures described above. I certify that I have reviewed the Research Plan/Project Summary and the International Rules, including the science fair ethics statement and will provide direct supervision.
Designated Supervisor's Printed Name  Signature  Signature  Signature  Date of Review (mm/dd/yy)
M. S. Biology  Experience/Training as relates to the student's area of research
experience/Training as relates to the student's area of research
Survivisible 14.5 Science Teacher Joyce Stark @ Swry side

Position/Institution