

Principal Investigator Form

PI Information

Name uNID

Department Email

Phone

List the buildings and room numbers for each lab that you manage (e.g. CSC 1234).

List all individuals that will be allowed to work in your lab.

Name Position Email

Location Hrs./week

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Describe specific hygiene and sanitization plans for equipment in your lab (e.g. microscopes, glove boxes, etc.).

Describe specific plans for ensuring physical distancing (6 ft. minimum) in your lab.

This form should be emailed to Daria Walker (daria.walker@utah.edu) who will upload it for approval. The form should be titled: "PI last name".

LAB SCHEDULE

PI's Name

Department

Building/room # (e.g. CSC 1234)

Room type

Dates (dd/mm/yy)

-

of safe occupants

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
7 am							
8 am							
9 am							
10 am							
11 am							
12 pm							
1 pm							
2 pm							
3 pm							
4 pm							
5 pm							
6 pm							
7 pm							

*If students are rotating shifts, there MUST be a 1-hour gap for sanitization.

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