RESEARCH AND LABORATORY COMPLIANCE
Required Prior to Advance Account or Sponsored Program Award Set up

PI Name: ___________________________ Date: ___________________________
TERA-PAMS Proposal No.: ___________ Sponsor Name: ___________________________
Proposal Title: ___________________________

Verification of research regulatory compliance: Check each category below that is applicable to the proposal referenced above. For each category marked as “yes” provide the requested protocol or permit numbers, if relevant. This is not an all-inclusive list of all possible required compliance approvals, so check website* below for full information.

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**If you checked Yes at left:**

- [ ] Yes  [ ] No  **Human subjects, including survey and interview data; protected health information**  Provide IRB protocol #: ___________________________
- [ ] Yes  [ ] No  **Recombinant DNA/transgenic animals, plants; Agents infectious to humans, animals or plants**  Provide IBC Registration #: ___________________________
- [ ] Yes  [ ] No  **Human or nonhuman primate materials** (e.g. blood, tissue, body fluids, cell lines)  Provide IACUC protocol #: ___________________________
- [ ] Yes  [ ] No  **Acute biological toxins (LD50<100ng/kg/ in vertebrates)**  Provide RSD Permit #: ___________________________
- [ ] Yes  [ ] No  **Vertebrate Animals**  Provide IACUC protocol #: ___________________________
- [ ] Yes  [ ] No  **Radioactive Material or X-ray Producing Machines (including XRF/XRD); Class III B or IV laser systems**  Provide RSD Permit #: ___________________________
- [ ] Yes  [ ] No  **Activities with hazardous substances (e.g. Chemicals, carcinogens, explosives, etc)**
- [ ] Yes  [ ] No  **Activities that involve significant physical hazards (e.g. Noise> 85 dBA, high pressure, altitude, electrical, or sub-radiofrequencies)**
- [ ] Yes  [ ] No  **Export Control (including sponsor restrictions on non-U.S. persons or publications; International collaboration or research that could have military utility)**
- [ ] Yes  [ ] No  **Is the award sponsored by a PHS agency, or does any member of the research team have a potential financial or organizational conflict of interest?**

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*Additional information can be obtained at UTK Research Compliance or by calling the appropriate compliance office:

- **Human Subjects:** Kristine Hershberger, IRB Compliance Officer, (865) 974-7687, kh@utk.edu (Contact person for Colleges of Architecture & Design; Education, Health & Human Sciences; Engineering; Law; Nursing; and University-Wide Units).
- **Human Subjects:** Laura Moll, IRB Compliance Officer, (865) 974-7494, lmoll@utk.edu (Contact person for Colleges of Agricultural Sciences & Natural Resources; Arts & Sciences; Business; Communication & Information; Social Work; and Veterinary Medicine).
- **Biological Safety:** Brian Ranger, Biological Safety Officer, (865) 974-1938, branger@utk.edu
- **Animal Subjects:** Elizabeth Bailey, IACUC Coordinator, (865) 974-3631, ebailey@utk.edu
- **Radiation Safety:** Marsha Smith, Radiation Safety Officer, (865) 974-5580, msmith@utk.edu
- **Environmental, Health & Safety:** Mark Smith, Environmental Health Director, (865) 974-5084, msmith38@utk.edu
- **Export Control & COI:** Dairin Malkemus, Export Control Officer, (865) 974-0232, dmalkemus@utk.edu

**I certify that all research compliance requirements have been or will be addressed prior to spending any funds on the account being requested for this project. (Electronic Signature is acceptable)**

PI Signature: ___________________________ Date: ___________________________

**For Compliance Office Use Only:** (Electronic Signature is acceptable)
This form and corresponding project has been reviewed and approved to proceed by all the pertinent Compliance Officer(s).

Approved by: ___________________________ Date: ___________________________

Submit By E-Mail  Print Form  Reset Form
Revised: August 6, 2015