

BIOSECURITY SHEET

(Please complete one Sheet per source origin)

**Authorization for experiments with controlled biological samples according to the
decree of the 15 January 2004.**

(Information required by the AFSSAPS and the French Ministry of National Defence)

Proposal number:

Name of responsible investigator:

Address of the institute:

Please fill this sheet out for ONE controlled source organism.

Name of sample(s):

Source organism of sample (and expression host):

Sample container:

Describe the context in which your work is framed:

Why did you choose that particular strain for research purposes?

Why did you choose those particular proteins as research targets?

What are the objectives of this research?

Do you have Collaborators for receiving the genes/proteins or toxins?

Questions related to Safety at the ESRF

Will you bring the samples

by yourself

or by mail ?

Where will the sample be stored during the stay at the ESRF? *(To be filled out by the responsible beamline scientists and safety group)*

After the experiment the samples will be

Removed by responsible scientist

Stored at the ESRF

I certify that I will declare all samples correctly for each scheduled experiment at the ESRF. I will not bring any sample of controlled biological agents (listed in the annexe of the French arrêté 15 janvier 2004) to the ESRF which have not been declared and accepted by the AFSSAPS.

Date:

Name:

Signature

Please fax this form to the ESRF Safety group: +33 (0)476 88 2418