

# Animal Worker Safety Acknowledgement Form

## User Category (Select One)

- Research Personnel (Faculty/Students)
- Non-Research Personnel (UTSA Employee)
- Non-Research (Contractor/Outside Services)
- Visitor

Department/Sponsor/Company:

Name (First, Middle, Last):

UTSA ID (abc123), if applicable:

Phone:

Email:

Supervisor/Principal Investigator/Sponsor's Name:

*I have read and understood the Animal Worker Safety Training information that pertains to my user category as checked above, in its entirety. I am aware of the potential risks and hazards of coming into contact (directly or indirectly) with research animals*

Signature

Date