



Potentially Hazardous Biological Agents (PHBA) Permission Form

For a print version [click here](#).

Must be completed BEFORE any TESTING begins.

Team Name:

Student Usernames:

To be completed by the team in collaboration with Team Advisor: (All questions must be answered; additional page(s) should be attached.)

1. List all Potentially Hazardous Biological Agents that will be used AND their biosafety level (BSL) (see [Potentially Hazardous Biological Agents document](#)).

2. Explain how all Potentially Hazardous Biological Agents will be handled based on the requirements explained on the [Potentially Hazardous Biological Agents document](#).

Team Advisor Printed Name

Team Advisor Signature

Date

As a school administrator I have reviewed the PHBA described above and give permission for the student to use them as part of their eCYBERMISSION project.

School Administrator Printed Name

School Name

School Administrator Signature

Date