Northeast Ohio Medical University
Educational Experience for High School Students – Approval Form

Requesting Employee: _____

Phone Number: _____

Department:_____ Department Chair/Supervisor:_____

Person Providing Direct Supervision to High School Student: _____
(This may be different than the requesting employee)

Name of High School Student:_____ Date of Birth: _____

Name of High School:_____

Start/date: _____ End/date: _____

To be completed by Requesting Employee:

Description of the educational experience (including activities in which the student will be engaged as well as the location of those activities, e.g., lab, classroom, department, etc.):

_____ Date: _____
Requesting Employee

I agree to provide supervision for the above-named High School Student and to take steps to assure his/her safety while on the NEOMED campus. I will ensure that the High School Student engages in only those activities that are set forth above and will provide constant supervision to the student while he/she is at NEOMED, including escorting the student as he/she traverses campus, unless the High School Student is provided with campus badge access in accordance with University policy.

_____ Date:_____

Person providing direct supervision

To be completed by the Safety Office:

Based on the educational experience being contemplated for the above-named High School Student, the following safety training(s) are required before the High School Student engages in work in the lab:

____ Infections waste/sharps

____ Lab Safety

____ Radiation and Laser Safety Awareness Training

The following limitations are being placed on the High School Student:

Upon completing of the foregoing training(s) and adhering the above-stated restrictions, I approve of this High School Student engaging in the educational experience described.

_____ Date: _____

Director of Environmental and Occupational Health and Safety

To be completed by the Department Chair:

I have reviewed the description of the educational experience being contemplated for the above-named High School Student and approve of the student being hosted in my department.

_____ Date: _____

Department Chair