



IBC Visitor Training Waiver Application
(to be completed by the UCLA Host)

The information provided in this application will help the IBC determine whether a training waiver may be granted to the visitor.

Visitor Information

Visitor Name:

Visitor Title at Home Institution:

Visitor Home Institution:

Visitor Biosafety trainings completed at home institution (include dates when training was completed):

Visitor pre-exposure medical surveillance and/or prophylaxis received at home institution:

*Visitor CV attached

UCLA Host Information

UCLA Host PI Name:

UCLA Supervisor Name (if different from UCLA Host PI):

Proposed length of visit to UCLA and frequency of visits, if applicable:

Will visitor be handling biohazardous materials or just observing procedures?

Will visitor handle or observe procedures involving animals?

Biohazardous materials that will be handled by visitor or used while visitor is present (also indicate if these materials are recombinant/synthetic):

BUA# which covers these materials:

Describe proposed activities involving biohazardous materials (including animals) while at UCLA: