



## Good Laboratory Practices (GLP) & Biosafety declaration

I, \_\_\_\_\_ (full name and roll number/employee code) declare that:

1. I have undergone the GLP and biosafety training at Biological Engineering, IITGN. (Yes/ No)
2. I have learnt the guidelines to be followed in any laboratory at IIT Gandhinagar insofar the experiments fall under the purview of biosafety.
3. I will adhere to and abide by all GLP and biosafety norms.
4. I will take responsibility to ensure that any person I supervise in the lab follows the same.
5. I will conduct myself in the laboratory ethically, maximize safety for myself and my colleagues, and mitigate risks.
6. If I have concerns and questions, I will bring it to the notice of my supervisor, project investigator, discipline coordinator and IBSC (institute biosafety committee) as appropriate.
7. That non-compliance with the GLP and biosafety norms will make me liable for penalty by the competent authorities.

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STUDENT/INTERN

LAB TRAINER & SUPERVISOR

SIGNATURE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

DATE: \_\_\_\_\_  
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**To be filled by the FACULTY MEMBER (Principal investigator of the project):**

1. FOR LAB USERS WHO DO NOT HAVE AN IITGN ROLL NUMBER OR EMPLOYEE ID:

Ms./Mr. .... is a non-IITGN member with following details:

(i) Status (student/intern/collaborator/others).....

(ii) Parent institution:

(ii) Clearance from Discipline Coordinator/Dean R&D/Dean Academics:

2. FOR ALL LAB USERS

Ms./Mr. .... may work in lab no. .... unsupervised, and in lab no. .... only under supervision.

SIGNATURE: \_\_\_\_\_

Date: \_\_\_\_\_

NAME: \_\_\_\_\_  
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Copy to Chairman, Safety Committee (IITGN) \_\_\_\_\_ Date: \_\_\_\_\_