LAS Visitor Request Form

Prior to visiting the vivarium space, please complete the following form. This information is used for security and biosecurity reasons, protecting both you and the research animals.

**Section 1. To Be Completed by Visitor**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Organization:</th>
</tr>
</thead>
</table>

Have you been in any type of animal facility or pet store within the last 48 hours?

- [ ] No
- [ ] Yes, please explain:

Do you own rodents or snakes as pets?

- [ ] No
- [ ] Yes, please explain:

Do you have any known allergies to animals?

- [ ] No
- [ ] Yes, which species of animals?

Have you ever been diagnosed with Tuberculosis or have had a positive PPD or other skin test?

- [ ] No
- [ ] Yes, please explain:

**Section 2. To Be Completed By Sponsor**

<table>
<thead>
<tr>
<th>Date(s) of Visit:</th>
<th>Length of stay:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Name of escort:</td>
</tr>
</tbody>
</table>

Will your visitor be working with animals?

- [ ] No
- [ ] Yes  If yes, you must have their name added to the AUP

Reason for visit:

Vivarium location(s): CA ☐  CB ☐  CL ☐  CN ☐  OB ☐

Proper dress is required to enter the animal facilities. This includes long pants and no open toed shoes. Personal Protective Equipment (PPE) will also be required in certain areas. Each area is specifically labeled for the proper PPE.

Entrance into an occupied animal room may require additional health screening including but not limited to TB or respirator fit testing. This additional screening must be scheduled with Health Services in advance of your planned visit.

**Signature of Visitor:** ____________________________  **Date:** ____________

**Sponsor requirements**

My signature indicates that I am an MCG employee who has control of the activities in which the above named individual will be engaged. I will ensure that the above individual is aware of and adheres to all relevant policies with regard to entering the Vivarium.

**Signature of Sponsor:** ____________________________  **Date:** ____________

**For LAS use only**

Reviewed/Authorized by:  **Title:**  **Date:**  **Visitor Badge Granted:**

- [ ] Yes  [ ] No, explanation:

Signature: ____________________________