

# SUNY ESF COVID-19 Research Safety Plan

(Return completed plan to Patricia Henson at [phenson@esf.edu](mailto:phenson@esf.edu))

\_\_\_\_\_  
Date of Submission

Is this an update to a previously approved plan? \_\_\_\_\_  
(Each active project requires an approved COVID-19 Research Safety Plan)

\_\_\_\_\_  
PI Last Name

\_\_\_\_\_  
PI First Name

\_\_\_\_\_  
PI Email Address

\_\_\_\_\_  
Department Name

Type of Research:

Is this a research project? \_\_\_\_\_

If yes, is the plan being submitted to cover multiple active projects? \_\_\_\_\_  
(see last page to list the additional active project acct # and project names)

If yes:

Research Project account # (project/task/award) \_\_\_\_\_

Research Project Name: \_\_\_\_\_

Location where the Field or Laboratory Research will be conducted (be specific: ex: Huntington Forest, Jahn Lab Rooms 231 & 233):

Duration the staff/students will be conducting the Field or Laboratory Research? (ex: Monday-Friday 8am-4pm, May 11-August 7, 2020):

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Additional Details:

\_\_\_\_\_ For Field Work, will staff/students share a residence?

\_\_\_\_\_ Is there a need for masks to comply with the Governor's Executive order?

\_\_\_\_\_ For Laboratory Research: Is the lab(s) identified above in compliance?  
Review the **Laboratory Inspection Checklist** at: <https://www.esf.edu/ehs/lsg/i.htm>

Within the 2 columns below, list all those currently involved or anticipated to be involved in the Field or Laboratory Research:

Note: After approved plan is in place, changes in personnel only do not require a submittal of an updated plan.

(Last Name, First Name and Email Address for each)

(Last Name, First Name and Email Address for each)

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PI Last Name (cont.)

*Page 3 optional, should you need to include additional information.*

For all research plans, how will you implement standard social distancing? For field research plans, how will you implement social distancing/safety measures both getting to the site and on site while maintaining safety requirements for whatever activity you or your staff/students are doing (ex: If you are going on a boat and require 2 people, are you able to maintain social distance and safety while operating the boat? How can you assure that multiple individuals mitigate risk of exposure or transfer of COVID-19)?

*Page 3 optional, should you need to include additional information.*

How will you implement environmental hygiene practices (ex: Frequent handwashing, wiping down shared equipment with disinfectants, etc.)?

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PI Last Name (cont.)

*Page 3 – Optional should you need to include additional information*

Include Additional Information for Field or Laboratory Research Plan, if need be.

If submitting the plan to cover multiple active projects, please list the additional information below:

Research Project account # (project/task/award) \_\_\_\_\_  
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