

Animal Research and Facility Employee Exposure Information Update Form

Name:	Phone Number:		Date:
Social Security Number:		Bear Number:	
Job Description/Title:		Department:	
☐ Faculty/Staff ☐ Graduate Student ☐Work Study ☐ Student ☐ Visitor/Contractor ☐ Other non-UNC			
Email Address:			
Elitar Address.			
PI/Supervisor Name:		PI/Supervisor Phone Number:	
Animal contact is defined as contact with animals, their unfixed tissues, fluids, wastes, equipment used in caring for animals			
(i.e. caging, anesthesia, biosafety, cage washing) or frequent entry into an animal facility.			
I will be working with animals, cages, or bedding. \square Yes \square No			
I will be working in facilities where animals are housed (i.e. performing walk through inspections, provide housekeeping and/or			
provide maintenance and repairs) but I will not handle animals, cages, or bedding. Yes No			
provide maintenance and repairs) but I will not handle animals, eages, or beading.			
Have you developed allergy symptoms or have previously reported allergy symptoms increased during the last year?			
□ Yes □ No			
If yes, please explain:			
Have you had any other medical changes during the last year that are a matter of concern to you when working with animals,			
cages, or bedding or in an animal facility? Yes No			
If yes, please explain:			
I certify that the above facts are true to the best of my knowledge and belief.			
Employee			
Signature:			