

Vivarium Visitor Access Form (CM-managed)

VISITOR INFORMATION

- **Full Name (Visitor):** _____
- **Institution/Company:** _____
- **Purpose of Visit:** _____

FACILITY ACCESS DETAILS

- **Date of Visit:** ___ / ___ / _____
- **Building:** _____
- **Room(s) to be Visited:** _____
- **Time In:** _____
- **Time Out:** _____

ACCESS AGREEMENT AND SAFETY ACKNOWLEDGEMENT

As a visitor to the FAU rodent vivarium, I understand and agree to the following:

1. **No photography or video recording is permitted** in any vivarium spaces **without prior written approval from the IACUC.**
2. By signing below, I confirm that I have not handled any rodents in the past 24 hours or that I have showered and changed clothing since handling.
3. There is a **low but possible risk of exposure to laboratory animal allergens (LAA)** such as dander, fur, and bedding dust. Individuals with known allergies or respiratory sensitivities should take appropriate precautions. I would like additional information: No Yes
4. I will follow all posted and communicated safety instructions, wear required Personal Protective Equipment (PPE), and remain with my authorized escort at all times.
5. I will not touch animals, cages, or equipment under any circumstances without prior written approval from the IACUC.

SIGNATURES

- **Visitor Signature:** _____ **Date:** ___ / ___ / _____
- **FAU Authorized Escort Name (Print):** _____
- **FAU Authorized Escort Signature:** _____ **Date:** ___ / ___ / _____
- **CM Representative Name (Print):** _____
- **CM Representative Signature:** _____ **Date:** ___ / ___ / _____

FOR CM USE ONLY

- Reviewed PPE & LAA Risk Escort Confirmed Entry Logged in Visitor Logbook