OHS097

Gene Technology Licence – Training & Information Statement

THE UNIVERSITY OF NEW SOUTH WALES

Accredited Organisation and Project Details

Accredited Organisation:	
Accreditation Number:	
Project Title:	
Licence Number:	Licence Expiry Date:

Project Supervisor Statement

As Project Supervisor for the gene technology project identified above, I acknowledge my responsibility to:

- Inform each person covered by the licence of the conditions of the licence that apply to them (including any variations of the conditions); and
- Ensure that each person covered by the licence is sufficiently trained to ensure that their dealings with genetically modified organisms (GMOs) are carried out in accordance with the licence conditions.

Supervisor Name:	Signature:

Acknowledgement by Research Staff and Students

The undersigned acknowledge that they:

- Understand the training and information provided to them in relation to the identified gene technology project; and
- Agree to comply with the licence conditions for the gene technology project identified above.

Name	Signature	Date