

ANIMAL HANDLING SCREEN

Name: _____ DOB _____
(print)

OSU e-mail (name.number)_____

Please check the animal groups with which you expect to be in contact:

- rats, mice, rabbits, other small laboratory animals
- dogs, cats
- cattle, sheep, goats, swine, other livestock
- raccoons, opossums, other common wildlife
- domestic and wild fowl, reptiles
- fish, other aquatic life
- non-human primates
- other (please list) _____

Depending on the types of anticipated animal exposures, you may be required to complete health screening beyond the basic requirements of your college. You will not be permitted in clinical areas with these animals without the appropriate screening.

Please return this form with your health screening and immunization form. You will be notified of any additional requirements once this form is reviewed.

I understand that I must complete the appropriate components of the Animal Handling Screen prior to any direct or indirect contact with animal s as part of my academic program.

Student signature _____ Date _____