

Plan for Safe and Inclusive Work Environments: UGA Genetics Department Form

You may submit your NSF Safe and Inclusive working plan as a supplemental file in lieu of most of this form. If you opt to do so, we ask that you provide specific details about the current research expedition by filling out Sections 1, 5, and 7.

1. Basic information

Names of individuals who will be performing off campus research

Duration of fieldwork (list specific dates and times)

Mode of travel to research site(s)

Is the researcher using a UGA vehicle? _____ If not, is a UGA decal provided? _____

2. Description of off campus research setting and assessment of risks

Description of off-campus research setting

What are the risks associated with travel to the research site?

Describe any anticipated risks while conducting research.

3. Mitigation strategies

Provide mitigation measures for travel to the research site.

Does the researcher have or will be provided with the following items?

A printed map of the routes and areas to be visited? _____

A GPS and compass when cell phone service is not available? _____

UGA attire? _____

Printed copy of any necessary permits? _____

Provide mitigation measures for risks while conducting research off campus.

Describe appropriate attire for this fieldwork.

Is specialized equipment needed for this research? _____
If yes, does the researcher have access to this equipment and have they received any necessary training for its use?

4. Steps to nurture an inclusive work environment

Have you established a code of conduct for team members conducting research off campus?

What are expected and unacceptable behaviors for participating in off campus research?

5. Communication plan

List the point of contact at UGA's name, email, and cell number

In the event of an emergency at the research site, which local rescue personnel would be contacted? List phone numbers for local emergency services. If applicable, also provide evacuation or shelter plans.

Has the UGA point of contact been provided with this list of emergency contacts? _____
 Are any research locations likely to be without cellular phone service? _____
 If yes, does the researcher have alternative mechanisms of communication, including (but not limited to) satellite phone, 2-way radio, walkie-talkie? List technologies provided for communication.

For each off-campus researcher, list one emergency contact (name and phone number).

6. Mechanisms for reporting, responding to, and resolving issues of harassment

Whom should the fieldworker contact if harassment, assault, bullying, or other safety violations occur?

What is the protocol for reporting these safety violations?

7. Agreement and dissemination

I have read the Genetics Department Protocol for Safe and Inclusive Work Environments and agree to abide by this Plan for Safe and Inclusive Work Environments.

Supervisor name _____
Signature _____ Date _____

I have read and understand the Genetics Department Protocol for Safe and Inclusive Work Environments and consent to perform off campus research based on this Plan for Safe and Inclusive Work Environments.

Researcher name _____
Signature _____ Date _____

Researcher name _____
Signature _____ Date _____

Researcher name _____
Signature _____ Date _____

Researcher name _____
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Researcher name _____
Signature _____ Date _____

8. Please use the space below to provide any feedback you have on this form, the process of developing a field safety plan, or any other concerns you have.