

**PRE-EMPLOYMENT QUESTIONNAIRE  
To BE COMPLETED BY  
NEW FACULTY WHO WILL BE INVOLVED IN RESEARCH ACTIVITIES UPON HIRE**

ENVIRONMENTAL HEALTH AND SAFETY DIVISION - OFFICE OF THE DIRECTOR

Please print and complete the following questionnaire as it relates to your MCG faculty appointment. Return the completed questionnaire along with the other documents that were included in your appointment package as instructed by the departmental representative assisting you in this process.

If you will be submitting a grant applicant for intramural research funding, please answer the following:

- Yes \_\_\_\_ No \_\_\_\_ Will you be a Principal Investigator:  
If yes, will you be working with the following?
- Yes \_\_\_\_ No \_\_\_\_ Radioactive Material
- Yes \_\_\_\_ No \_\_\_\_ Hazardous Chemicals
- Yes \_\_\_\_ No \_\_\_\_ Bio-hazardous materials including: BSL 1-3 agents, cells, pathogens, bio-toxins
- Yes \_\_\_\_ No \_\_\_\_ Recombinant DNA

Do you want to transfer the following from your current institution to MCG?

- Yes \_\_\_\_ No \_\_\_\_ Radioactive Material
- Yes \_\_\_\_ No \_\_\_\_ Chemicals
- Yes \_\_\_\_ No \_\_\_\_ Biological material including any bio-hazardous material listed above.
- Yes \_\_\_\_ No \_\_\_\_ DEA controlled substance

If "yes" has been checked to any of the above questions, the questionnaire must be faxed to the following prior to shipping any of the above materials to MCG and prior to the effective date of appointment.

Dr. James Davis, Director  
Environmental Health and Safety Division  
(706) 721-9844 Fax Number

MCG Faculty Employment Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_

Rank/Title: \_\_\_\_\_

Academic Unit and Center or Institute (if applicable):  
\_\_\_\_\_

Contact information prior to MCG arrival: \_\_\_\_\_  
\_\_\_\_\_