**University of Colorado Colorado Springs**

**IBC BIOSAFETY APPLICATION FORM**

**Attachment II - Section C: Plants**

**Biosafety Application#  (Office Use Only)**

**Renewal for Application #** (Office Use Only)

**Administrative Information** Principal Investigator: 

Email Address:

**I. General Information:**

**A. Plant Species**

Transgenic: [ ] Yes [ ]  No

USDA-APHIS Permit required: [ ] Yes [ ] No Type/number:

USDA-APHIS Notification: [ ] Yes [ ]  No Number:

Field project duration: From:  To: 

Noxious weed (US or CA): [ ] Yes [ ] No

Method of reproduction: [ ] Self [ ] Wind pollinator [ ] Insect pollinator [ ] Human intervention required

**B. Location of work**:

[ ]  Laboratory Room: Building/Room 

[ ]  Growth Chamber: Building/Room 

[ ]  Greenhouse: Building/Room 

[ ]  Field Location, GPS coordinates: 

**C. Type of Recombinant DNA Experiment (see Worksheet 1 below)**

[ ]  Section III-D-5:

[ ]  Section III-E-2:

[ ]  Containment level used:

[ ]  BL-1-P [ ]  BL-2-P [ ]  BL-3-P

**II. Transgenic Plant Information**

Recombinants will have special growth requirements: [ ] Yes [ ]  No

Recombinants are expected to be more pathogenic: [ ] Yes [ ]  No

1. **Transformation method:**

[ ]  *Agrobacterium tumefaciens* (all tumorigenic DNA removed)

[ ]  Particle bombardment

[ ]  Other:

1. **Inserted or deleted/silenced gene information:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Gene Modification** | **Gene Name** | **Gene Source** | **Encode For** | **USDA-APHIS****Notification Number** |
| **Insert** | **Delete/****Silence** |  |  |  |  |
|[ ] [ ]        |       |       |       |
|[ ] [ ]        |       |       |       |
|[ ] [ ]        |       |       |       |
|[ ] [ ]        |       |       |       |
|[ ] [ ]        |       |       |       |

 **C. Characterization of inserted gene:**

 [ ]  Pharmaceutical

 [ ]  Pesticide, microbial pesticide, other plant-incorporated protectant

 [ ]  Pesticide resistance

[ ]  Pathogen, pest, or herbicide resistance

 [ ]  Selectable marker genes that will not be removed

[ ]  Other:

**III. Containment**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Greenhouse** | **Growth Chamber** | **Tissue Culture Use** |
| Pollen | [ ] Yes [ ] No | [ ] Yes [ ] No | [ ] Yes [ ] No |
| Seeds | [ ] Yes [ ] No | [ ] Yes [ ] No | [ ] Yes [ ] No |
| Whole plants | [ ] Yes [ ] No | [ ] Yes [ ] No | [ ] Yes [ ] No |
| Motile macrorganisms insects, nematodes  | [ ] Yes [ ] No | [ ] Yes [ ] No | [ ] Yes [ ] No |
| Microorganisms  | [ ] Yes [ ] No | [ ] Yes [ ] No | [ ] Yes [ ] No |

**IV. Inactivation of biological material by (describe in scope of work narrative):**

[ ]  Chemical Inactivation; Disinfectant

[ ]  Autoclave, Location(s)

[ ]  Physical Destruction, Method:

[ ]  None

**V. Field release:** [ ] Yes [ ]  No

**VI. Environmental impact if accidentally released**: [ ] Yes [ ]  No

If yes, methods used to prevent release:

**VII. Transportation of recombinant plants**: [ ] Yes [ ]  No

If yes, methods used to prevent release:

**VIII. Methods used to minimize dissemination and inadvertent release:**

[ ]  Removal of flower and seed heads

[ ]  Harvest prior to sexual maturity

[ ]  Cloaking of flowers to prevent seed and pollen dispersal

[ ]  Use of male sterile lines

[ ]  Keeping distance between infected plants and a susceptible host

[ ]  Choosing season/chronological timing of experiment to prevent cross contamination of susceptible plants

[ ]  Removal of vectors for insect borne transmission

[ ]  Use of plants genetically disabled for survival in the wild