

Application for Exemption by an Institution from the requirement to appoint a Maori member to the Institutional Biological Safety Committee

NB: Please fill in a new form for each IBSC if the Institution has more than one IBSC.

1	Name of Institutional Biological Safety Committee (IBSC):		
2	Location of the IBSC:		
3	Expiry date of existing delegation:		
4	Does the IBSC intend to consider any future applications involving human DNA, or native flora or fauna (either as the source of DNA or a host)?	Yes	No
5	Name and contact details of hapu or iwi with mana whenua in the location of the IBSC, if known. Attach details as appropriate.		
6	If name of hapu or iwi is not known, explain what steps were taken to try to gain this information. Attach details as appropriate.		
7	Provide an explanation of what steps were taken to try to obtain a nomination from the relevant hapu or iwi. This should include information on which hapu and iwi were attempted to be contacted, in what manner, over what period of time, and with what outcome. Please attach the explanation and any other relevant information to this form.		

Signature:

Date:

[Chief Executive of the Institution, or a person authorised to sign on behalf of the Chief Executive]