

Biology 275L
Cell and Molecular Biology
Laboratory

Lab Manual

Student Survey Form

Please complete this form and give it to your instructor before leaving the introductory laboratory session. This information will give your instructor some knowledge of your background in biology and the other natural sciences.

NAME:

PHONE NUMBER:
(Optional and confidential)

E-MAIL ADDRESS:

MAJOR:

CLASS STANDING (Junior, Senior, etc.):

What are your future career goals?

- Go to graduate school and study _____
- Attend (please circle): Medical/Pharmacy/Dental/Physical Therapy/Veterinary School
- Work
- Teach

Why are you taking this course? Check all that apply:

- It is required for graduation
- It is required for medical/veterinary/pharmacy/dental/grad school
- For fun
- Other: please state _____

What do you expect from this course?

What do you expect from your instructors?

Important Information

Student Name: _____

Lab Section: _____ Lab Meeting Day and Time _____

Name of Teaching Assistant: _____

Teaching Assistant's e-mail: _____

Office Hour Location: Dean Hall Room 2

Teaching Assistant's Office Hours: _____

Name of Secondary Teaching Assistant: _____

Secondary Teaching Assistant's e-mail: _____

Secondary Teaching Assistant's Office Hours: _____

Additional Information:

If found, please return this manual to the Biology Program Office, Room 2,
Dean Hall (open 7:45 AM to 4:30 PM)

UNIVERSITY OF HAWAII AT MANOA

BIOLOGY 275L, SPRING 2007

Waiver of Liability, Assumption of Risk, and Indemnity Agreement

WAIVER: In consideration of being permitted to participate in any way in Biology 275L for the Spring semester of 2007 at the University of Hawaii at Manoa (hereinafter called "Activity"), I, for myself, my heirs, personal representative or assigns, **do hereby release, waive, discharge, and covenant not to sue** the University of Hawaii, its Board of Regents, its officers, employees, and agents for any liability **from any and all claims** resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in Activity.

ASSUMPTION OF RISKS: Participation in Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains, to 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions, to 3) catastrophic injuries including paralysis and death.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in Activity. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

INDEMNIFICATION AND HOLD HARMLESS: I also agree to INDEMNIFY AND HOLD the University of Hawaii, its Board of Regents, officers, employees and agents, HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages, and liabilities, including attorney's fees brought as a result of my involvement in Activity and to reimburse them for any such expenses incurred.

SEVERABILITY: I further expressly agree that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of Hawaii and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue to be in full legal force and effect.

ACKNOWLEDGEMENT OF UNDERSTANDING: I have read this Waiver of Liability, Assumption of Risk, and Indemnity Agreement, fully understand its terms and **understand that I am giving up substantial rights including my right to sue.** I know, understand, and appreciate the inherent risks of the Activity. I assume full responsibility for any and all injuries or damages which may occur to me as a result of the inherent risks associated with the Activity. I further acknowledge that I am signing the agreement freely and voluntarily, and **intend by my signature to be a complete and unconditional release of all liability** to the greatest extent allowed by law.

PLEASE RETAIN THIS IN YOUR MANUAL FOR REFERENCE. YOU WILL BE GIVEN A FORM TO SIGN IN CLASS ON THE FIRST DAY OF LAB.

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Laboratory Schedule

Week 1:	01/08/07	Lab 1 Introductory and Writing Summary Laboratory
Week 2:	01/15/07	Lab 2 Isolating Total RNA
Week 3:	01/22/07	Lab 3 PCR
Week 4:	01/29/07	Lab 4 Plasmid Ligation and Cloning
Week 5:	02/05/07	Lab 5: Isolation of DNA
Week 6:	02/12/07	Lab 6: Restriction Enzyme Analysis
Week 7:	02/19/07	Lab Midterm
Week 8:	02/26/07	Lab 7: SDS-PAGE 1. Protein Electrophoresis
Week 9:	03/05/07	Lab 8: SDS-Page 2. Electrophoresis
Week 10:	03/12/07	Lab 9: Introduction to Equipment II
Week 11:	03/19/07	Lab 10: Fluorescence Microscopy
Week 12:	03/26/07	Spring Break
Week 13:	04/02/07	Lab 11: Immunofluorescence Microscopy
Week 14:	04/09/07	Lab 12: ELISA
Week 15:	04/16/07	Lab 13: Principles of Enzyme Kinetics
Week 16:	04/23/07	Final Exam

There will be NO make up labs.