User Access & Authorization Form

E6-078 Chemical Prep Lab

# User Details:

|  |  |  |  |
| --- | --- | --- | --- |
| User’s Name: |  | Supervisor: |  |
| Email: |  | ID number: |  |
| Role: |  | (PI, PDF, RA, grad student, etc.) | |

# Training:

|  |  |  |
| --- | --- | --- |
| **Course / Training** | **Date Completed** | **Confirmed by** |
| UofA WHMIS Training |  | (Attach Certificate) |
| E.H.&S. Laboratory Safety course |  | (Attach Certificate) |
| E.H.&S. Chemical Safety course |  | (Attach Certificate) |
| Lab Orientation (to be done by PI); orientation to include review of the lab policies: https://sites.google.com/a/ualberta.ca/ece-chem-prep-lab/ |  |  |

# PPE Checklist

Laboratory Supervisor will identify below PPE requirements and special conditions for the PPE.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ☒ | Appropriate gloves |  | Hearing protection |  | Safety goggles |
| ☒ | Floor length pants or equivalent |  | Face shield |  | Apron |
| ☒ | Laboratory coat or gown |  | Respirator |  | Safety shoes |
| ☒ | Safety glasses |  | Hard hat |  | Flame resistant clothing |
| ☒ | Closed toe shoes |  | UV protective eyewear |  | Other (specify) |

Special Conditions (note specific location or activities that require a change in PPE. If nothing is listed, the specified PPE must be worn at all times in the laboratory). Example: Apron, face shield, and double gloves required when working with HF.

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|  |

# User Contract

My signature below indicates that I understand and will follow the ECE Chemical Preparation Lab Policies and the PPE Requirements.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |

# Supervisor Permission

I confirm that this individual requires access to the shared lab as part of our research.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |

# One Card Access:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| OneCard Access: |  | All Hours Lab Access (24/7) |  | | Office Hours Lab Access (8am – 5pm) | | |
|  |  | Freight Elevator (for chemical transport) | | | | | |
| Expiry Date: |  |  | |  | | N/A |  |

# Approval: *ECE Authority (Safety Officer)*

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name: |  | | | Signature: | |  | | Date: |  |
|  |  | | | |  | |  | | |
| ***Admin Use Only:*** | | ☐ | *User added to master ChemPrep Approved User List (google docs)* | | | | | | |
|  | | ☐ | *Card Access Updated* | | | | | | |