CHEMISTRY 199: Campus/Departmental Safety Requirements

Attach this form to your campus Chem199 application

The Department of Chemistry and Biochemistry welcomes your interest in our undergraduate research program. We want your involvement in research to be educational, enjoyable, and safe. All researchers must comply with campus and departmental safety policies to ensure both their personal safety and the safety of others. As part of your application, you will need to complete the requisite safety training. Following the completion of your training, you will be eligible to receive Personal Protective Equipment (PPE).

Repeating Chem 199 students: Proceed to signatures below.

New Chem 199 students: You must complete the following safety training steps and gather required signatures before your application may be approved.

1. Complete mandatory online training courses. To access this training, please login to ulearning.ucsd.edu with your Student Sign On. Once you have signed in search for the course titles in the upper-left search box.
   a. “UC Laboratory Safety Fundamentals”
   b. “Annual Laboratory Hazards Training”

   Print the certificate of completion and attach to this form.

2. Lab-specific safety orientation. Meet with your faculty advisor and the group safety coordinator to learn about specific risks and safety policies associated with the lab. Complete UCSD required “New-Worker” checklist with the group.

I certify that I completed the required safety training and I will abide by the policies governing my research activities. I will not work alone; I will dress appropriately for lab-work (e.g. natural fibers, leg-body coverage, and closed shoes); I will wear safety eyewear and use appropriate protective equipment during laboratory research activities (e.g. lab-coat, gloves, face-shield); I will report accidents immediately; I will promptly seek medical attention for injuries and exposures; and I will respond to emergencies in accordance to training.

Applicant Name __________________________ Signature __________________________ Date __________

I have verified that the student completed the required safety training, a “New-Worker” checklist is now complete and the student was added to CHUA.

For returning students: I verify that the student continues to maintain required safety standards and annual training is up to date.

Faculty Mentor Name __________________________ Signature __________________________ Date __________

Bring your completed and signed form to UCtr 401 (map), room 107, Monday through Friday, 10 a.m. — 3 p.m., to select and be fitted for your PPE. *Note: This only needs to be completed once.

Appropriate PPE has been provided.

EH&S Representative Name __________________________ Signature __________________________ Date __________