Lab safety awareness confirmation form

ESMP Lab

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, confirm that I have recieved and understood the following safety instructions governing the safe work in the ESMP labs:

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| **Instructions given** | **Remarks** |
| 1. Emergency exit, fire alarm pull station, assembly point, emergency phone number, first aid box location |  |
| 1. Wearing of personal protective equipment (PPE) |  |
| 1. Usage of safety shower and eyewash and their location |  |
| 1. Proper glove selection and usage |  |
| 1. Spill kit usage and location |  |
| 1. Lab cleanliness |  |
| 1. Fume hood operation |  |
| 1. Handling of Thiols |  |
| 1. Chemicals storage, transport, use of acids and bases, quartzy |  |
| 1. Yellow lab rules |  |
| 1. UV Irradiation |  |
| 1. Waste management |  |
| 1. Safety blanket, fire extinguishers (location) |  |
| 1. Location of electricity boxes/power kill switch |  |
| 1. Lone worker device |  |

I also confirm that I will abide by the safety rules of ESMP lab.

Date:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Safety cordinator |  |
| Lab manager |  |
| Lab head |  |