Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RESEARCH LABORATORY:**

**Location of Lab(s):**

 **Emergency Contact of Supervisor**

**Name:**

**Office Location:**

|  |  |  |
| --- | --- | --- |
| **Building/Room #** | **Campus Phone Number** | **Emergency Phone Number** |
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 **Laboratory Safety Representative**

**Name:**

**Desk Location:**

|  |  |  |
| --- | --- | --- |
| **Building/Room #** | **Campus Phone Number** | **Emergency Phone Number** |
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 **Minimum Required Personal Protective Equipment**

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| --- | --- | --- |
| **PPE Item** | **Date** | **Initials** |
| **Safety Glasses / Goggles** |  |  |
| **100% Cotton Lab Coat** |  |  |
| **Appropriate Lab Gloves** |  |  |
| **Long Pants** |  |  |
| **Fully Enclosed Shoes*** *Bare feet, sandals, and open toed shoes not permitted*
 |  |  |
| **Supervisor’s Initials and Date** |  |  |

*Note: cotton-based clothing is recommended in case of fire-related accidents*

 **Location of Safety Equipment**

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| --- | --- | --- | --- | --- |
| **Safety Item** | **Room:** | **Room:** | **Initials** | **Date** |
| **Fire Alarms** |  |  |  |  |
| **Fire extinguisher& type** **(i.e. A,B,C,D)** |  |  |  |  |
| **Fire extinguisher& type** **(i.e. A,B,C,D)** |  |  |  |  |
| **Fire Exits** |  |  |  |  |
| **Emergency Phone** |  |  |  |  |
| **Eyewash Station** |  |  |  |  |
| **Emergency Shower** |  |  |  |  |
| **MSDS forms** |  |  |  |  |
| **Electrical Shut Off** |  |  |  |  |
| **Gas Shut Off** |  |  |  |  |
| **Evacuation Assembly Area** |  |  |  |
| **Spill Cart #1** |  |  |  |
| **Spill Cart #2** |  |  |  |
| **Floor Fire Warden** |  |  |  |
| **First Aid Attendant** |  |  |  |
| **First Aid Station** |  |  |  |
| **Supervisor’s Initials and Date** |  |  |

**Basic Equipment/Procedure Training**

As a graduate student or postdoctoral fellow, it is expected that you will have completed an undergraduate degree where you will have been shown the proper use of many pieces of lab equipment and basic laboratory chemicals***. Putting your initials in the box below will indicate that you have been previously trained, understand and are comfortable in the basic operation of the following.*** If you don’t remember the proper use of the lab equipment from your undergraduate degree, ***do not initial the box.*** Please ask your supervisor for further assistance.

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| **Equipment/Procedure** | **Initials** | **Date** |
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| **Supervisor’s Initials** |  |  |

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| **Equipment/Procedure** | **Initials** | **Date** |
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| **Supervisor’s Initials** |  |  |

**Advanced Equipment/Procedure Training**

The following is a list of advanced equipment/procedures/chemicals that you are not allowed to use until you have had specialized training at UBC (even if you has been trained at a previous institution). You must be (1) trained by qualified laboratory personnel and (2) supervised in the safe operation of the following advanced procedures. Initial and date the box when you have been trained and supervised in the safe operation of the procedure ***and*** you are confident that you can perform the task safely.

***Note:*** The training can be done by the PI or by someone designated by the PI who is qualified in the safe operation of the procedure. Do not initial the box until the student has demonstrated that they can perform the operation safely.

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| --- | --- | --- | --- |
| **Equipment/ Procedure** | **Trainee Initials/****Date** | **Supervised by/****date** | **PI Initials/****date** |
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| **Equipment/ Procedure**  | **Trainee Initials/****Date** | **Supervised by/****date** | **PI Initials/****date** |
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