

Application to work in CMSC Laboratories

Applicant's Name

MSU ID Number:

ID Bade Code:

Primary Telephone:

ID Badge Code is the 6 digits after the asterisk * on the reverse side of your MSU ID card

MSU NET ID:

Must have MSU email address with extension of ...@msu.edu

MSU Status:

Faculty

Grad Student

Undergrad Student

Post Doc

Visiting Scholar

Account Number:

Sub-Account Number:

Instruments Requested: list all instrument that you intend to use in CMSC Labs.

Materials: Provide a listing of materials you intend to bring to CMSC Labs. You are required to notify CMSC if there are changes to this list.

Date applicant completed EHS Chemical Hygiene, Laboratory Safety, and Hazardous Waste Training:

Date applicant completed Cylinder Safety Training:

Date applicant reviewed MSU Chemical Hygiene Plan

http://www.ehs.msu.edu/chemical/programs_guidelines/programs_guidelines.htm

INFORMED CONSENT STATEMENT: By signing below, the applicant acknowledges that he/she has been sufficiently informed about the location, availability, and contents of MSU's Chemical Hygiene Plan.

Applicant's Signature:

Advisor's Signature:

Advisor's Printed Lastname:

Date Applicant Received CSMC Safety Training:

Training Provided by:

Per Askeland

Mike Rich

Ed Drown

Brian Rook