

UNIVERSITY OF NOTRE DAME  
DEPARTMENT OF CHEMISTRY AND BIOCHEMISTRY

**SAFETY COMPLIANCE FORM**

There are inherent dangers in the practice of chemistry and biochemistry. These dangers include (but are not limited to) fire, explosion, exposure to toxic substances, exposure to mutagenic, teratogenic, and carcinogenic substances, radiation danger, and exposure to pathogenic substances. **As such, all laboratory coworkers must be aware of general laboratory dangers, dangers that are specific to individual laboratories, and best practices to minimize accidents and injuries.** Therefore, **before beginning laboratory work**, you must sign this form indicating that you have complied with the following requirements.

1. I have taken the appropriate initial training administered by University of Notre Dame's Risk Management and Safety Department as required to perform my duties (check all that apply):

- |                          |                    |                          |   |
|--------------------------|--------------------|--------------------------|---|
| <input type="checkbox"/> | General Lab Safety | <input type="checkbox"/> | BSL1-2 Safety (with General Lab Safety) |
| <input type="checkbox"/> | Radiation Safety   | <input type="checkbox"/> | Laser Safety                            |

2. I have familiarized myself with the contents of the University's *Chemical Hygiene Plan*\*, as well as all pertinent safety manuals and policies\* associated with my planned laboratory work. These include where applicable:

- |  |   |
|--|---|
| (a) <i>The Biosafety Laboratory Manual</i> | (d) <i>The Bloodborne Pathogens Control Plan</i>    |
| (b) <i>The Laser Safety Manual</i>         | (e) <i>The Personal Protective Equipment Policy</i> |
| (c) <i>The Radiation Safety Manual</i>     |   |

I understand if my duties change, I may be required to take additional training.

3. I have consulted with my faculty supervisor regarding the specific Personal Protective Equipment (PPE) policy of his/her laboratory. If required, an *Employee PPE Knowledge Certification Form*\* has been completed and signed by my supervisor.

4. I have read and will abide by the *University of Notre Dame, Department of Chemistry and Biochemistry, General Laboratory Safety Rules and Regulations for Stepan Hall of Chemistry & Biochemistry and Nieuwland Science Hall*\*.

5. I understand that there may be safety practices that are **specific or unique to the laboratory in which I will work**. I have arranged for my supervisor (or designated senior laboratory personnel) to provide me with the appropriate training and information.

6. I will carry out all experiments and procedures in a manner that maintains my safety and that of others in the laboratory.

7. When dealing with unfamiliar substances or procedures I will seek the advice and assistance of someone who has the appropriate experience and knowledge.

8. I will promptly report breaches of standard safety practices, potential hazards, and unsafe conditions to my supervisor or Department Safety Officer ([mprorok@nd.edu](mailto:mprorok@nd.edu)).

_____ Coworker signature	_____ Printed Name	_____ Date
_____ Supervisor (or designate) signature	_____ Printed Name	_____ Date

\*All documents are available at <http://riskmanagement.nd.edu/> or <http://chemistry.nd.edu/safety/>.