

Beaudry Research Group: Safety Training Record

NAME: _____

This training record is to document that the individual named above has received safety training instruction in the indicated areas. Use empty lines to record any other safety training activities that are conducted in addition to those printed. The completed record will be maintained and filed by Professor Beaudry in LPSC 233.

Personal declaration of individual named above:

I hereby acknowledge that I have read and understood the following safety instructions and standard operating procedures (SOPs) available from the URL below, and that I have received any required practical training in these areas:

http://www.chemistry.oregonstate.edu/blakemore/chemical_hygiene_plan.html

I pledge that I shall adhere to the laboratory attire policy of the Department of Chemistry (clothing covers body from shoulders to ankles, closed toed shoes, no short pants or short skirts) and that I will wear required personal protective equipment (at a minimum, laboratory coat and approved safety glasses/goggles) at all times while in the laboratory.

Safety Instruction/SOP	signed	date completed
CH607 (010) - Chemical Safety Seminar class		term taken:
pledge to follow laboratory attire policy and to wear required lab PPE		
chemical storage		
cryogenics		
drying ovens		
electrical safety		
fire safety		
fume hoods		
gas cylinder safety		

Beaudry Research Group: Safety Training Record *(continued)*

