New AMCaT User Form

1. User Information

Full Name: ____________________________________________

Last  First

Department: ____________________________________________

Supervisor: ____________________________________________ Phone Number: (______)______________________

Supervisor’s Email: ____________________________________

Status: □ Faculty □ Staff □ Undergrad □ Grad Student □ Post-Doc □ Off-site

User Phone Number: (______)___________________________

E-mail Address: ________________________________________

2. Recharge Information

This section authorizes AMCaT to recharge for the use of its instruments and services.

Authorized Recharge Activities

• Instrument usage (TEM, SEM, XRD, 2500, etc.)
• Services (analyses, sample preparation, etc.)
• Training (TEM, SEM, XRD, and other short-courses)
• Repairs for damage to equipment, chemical disposal, etc.

Account Information:

Department: ____________________________________________

P.I. (Principal Investigator): ________________________________

Please enter the 7 character DAFIS account information for all accounts to the user above will use in AMCaT Labs.

• __________________________________________________________________________
• __________________________________________________________________________
• __________________________________________________________________________
• __________________________________________________________________________

PI Signature Approval: _____________________________ Date: ____________________________
3. Door Code

A door code will be issued to you after registering with AMCaT by filling out and submitting this “New User” Form to the Lab Manager followed by AMCaT Lab Safety Training. The door code is not issued by the AMCaT Lab Manager. It will be emailed to you by the CHMS Safety Officer.

Problems:

If you have any issues with your door code, you forget the door code, someone else learns of it, or you have a problem with the access control system, please contact the AMCaT Lab Manager.

Responsibilities:

- Keep your code confidential.
- You are not allowed to give other people your door code.
- You are not allowed to give other people access who are not AMCaT registered.
- You are not allowed to share your door code with group members.

Your signature below acknowledges that you understand your responsibilities with being issued a door code.

User Signature: ____________________________ Date: ____________

4. Initial Safety Training

Please read the initial training document and then bring this new user form with you to the AMCaT lab for a brief safety training walk through. Topics covered in the initial safety training document and in the safety walkthrough include:

- The potential hazards in AMCaT labs
- The availability and location of safety literature including: MSDSs, Safety Nets, SOPs, AMCaT Policies and Procedures, and CHMS Chemical Hygiene Plan.
- General emergency procedures including: evacuation procedures, contact information, etc.
- General lab procedure responsibilities
- Hazardous waste disposal
- Personal Protective Gear and Equipment
- Specific equipment training requirements including the requirement that I {not use any equipment that I am not trained on.
- The policies regarding the costs of equipment repairs due to improper use.
- My rights to ask questions or be provided with any information or assistance regarding my personal safety.
- My responsibilities with reporting risks, dangers, and incidents in the lab.
- The importance and the requirement of keeping all lab work areas clean and tidy.

I have read and understand the initial training document and acknowledge that I have been given a safety training walkthrough which covers, but is not limited to the above topics. I also agree to comply with these AMCaT rules.

User Signature: ____________________________ Date: ____________

Lab Manager Signature: ____________________________ Date: ____________