

## EnE Laboratory Services Request Form (Scheduling and Hazards Declaration)

**This form must be completed and returned to Dr. Terry Baxter (Lab Director) or Gerjen Slim (Lab Manager) for all classes and projects prior to using the EnE Labs, lab equipment or chemicals, or when requesting assistance from the Lab Manager. Lab Aid assistance may only be requested through the Lab Manager.**

Which labs are requested and/or if Lab Manager's assistance is needed? \_\_\_\_\_

**Note: The Lab Director or Lab Manager will contact you to discuss your request.**

What are your needs for equipment, general supplies and chemicals? \_\_\_\_\_

1. Briefly describe the activity (Project name, objective, etc.) and declare known hazards associated with this work. \_\_\_\_\_

2. Faculty sponsoring activity (print name). \_\_\_\_\_  
(Signature). \_\_\_\_\_

3. Primary Contact Information (print name). \_\_\_\_\_  
E-mail \_\_\_\_\_ Phone \_\_\_\_\_

4. Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

5. List the equipment, supplies and chemicals needed on a separate sheet and attach/submit along with this form.

**Sample (media)** = air, water, wastewater, soil, other

**Parameters/Method** = BOD, lead by ICAP, PM, etc.

**Storage** = refrigeration, freezing, etc.

**Hazard** = toxic, pathogenic, flammable, corrosive, explosive, carcinogenic, mutagenic, tetragenic, radiation or unknown

**Disposal method** = hazardous waste container, sink disposal, trash bin, etc.

6. Will you be receiving or shipping any environmental samples? **Y/N**

**Declare environmental samples on the additional sheet and describe the type of sample, parameters and analytical methods, sample storage requirements and known hazards.**

7. Attach your project or experimental plan and all MSDS for chemicals being handled.  
(Project plan should include waste disposal procedures.)

8. Source of funds used for this project. \_\_\_\_\_

9. List all individuals who will be participating in this activity and will be in the laboratory (The course instructor or project director should be included on the following list. Regularly scheduled classes may attach a class roster).

Name (attach additional sheets as needed)	Safety training needed?
_____	Y/N
_____	Y/N
_____	Y/N

**Note: It is required, in accordance with OSHA Lab Standard 29 CFR 1910.1450, that persons be provided training before performing work in the laboratory.**