

D-142 FUME-HOOD FACILITY

QUALIFIED-USER AGREEMENT

- I have received hand-on orientation for using D-142 Fume-Hood Facility.
- I have completed the REHS Lab Safety Training and annual refreshers.
- I have read and understand the Standard Operating Procedures for the Fume Hood Laboratory.
- I understand the Chemical Hygiene and Safety Rules to be followed in the laboratory.
- I know the location of the Eye Wash Station located in the hallway in the laboratory.
- I know the location of the Spill Containment Pads and have been instructed on the action to be taken in the event of a spill.
- I have received a copy of Rutgers Environmental Health and Safety Emergency Action and Fire Prevention Plan.
- This agreement is valid for 3 years from the date of signing, unless otherwise revoked.

User Name: _____ **User Signature:** _____ **Date:** _____

- I give consent for my group member to use the Fume-Hood Facility, and agree to contribute to its annual operating cost.

Advisor Name: _____ **Advisor Signature:** _____ **Date:** _____