

**This form should be filled out by any student/ employee that wants to use chemicals under the hood in MSE teaching labs.**

Please submit the completed form to [LabSafetyAccess@mse.gatech.edu](mailto:LabSafetyAccess@mse.gatech.edu)

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| 1. **Contact Information of Participants**   **Participant 1 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GT Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Cell #: \_\_\_\_\_\_\_-\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_ GTID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  *Participant 2 has completed RTK and Lab Safety 101*  *————————————————————————————————————————————*  **Participant 2 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GT Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Cell #: \_\_\_\_\_\_\_-\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_ GTID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  *Participant 2 has completed RTK and Lab Safety 101*  *————————————————————————————————————————————-*  **Participant 3 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GT Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Cell #: \_\_\_\_\_\_\_-\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_ GTID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  *Participant 3 has completed RTK and Lab Safety 101*  ————————————————————————————————————————————-  **Participant 4 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GT Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Cell #: \_\_\_\_\_\_\_-\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_ GTID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  *Participant 4 has completed RTK and Lab Safety 101*  ————————————————————————————————————————————-  **Participant 5 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GT Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Cell #: \_\_\_\_\_\_\_-\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_ GTID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  *Participant 5 has completed RTK and Lab Safety 101*  ————————————————————————————————————————————-  **Participant 6 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GT Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Cell #: \_\_\_\_\_\_\_-\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_ GTID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  *Participant 6 has completed RTK and Lab Safety 101* |
| 1. **Lab access information**   **Room No. & Building of Lab: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Reason for using lab: Class/Course Research Lab Others**  **Name of PI/ Course/ Others: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Duration of use** (MM/DD/YYYY)**: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_ - \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_** |
| 1. **Chemicals Information (all chemicals must be listed)**  |  |  |  | | --- | --- | --- | | **Chemical Names** | **Quantities** | **Storage + Disposal Plans** | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  |   **Hazards (check as many as applicable):**  \_\_\_Flammability \_\_\_Health hazards \_\_\_\_Compressed gas \_\_\_Corrosive  \_\_\_Explosive \_\_\_Oxidizers \_\_\_\_Environmental \_\_\_Acute toxicity  \_\_\_Others:  ***Note*:** *Chemicals will be disposed of if no contact information is provided for the designated workspace under the fume hood.* |
| 1. **Experimental Protocols**   **Experiment Title/ Description (brief summary):**  **Equipment and Instruments Used:**  **Experiment Procedure (order of operations, amount of chemicals used, etc.):** |

**Approved by MSE laboratory manager-Masood Ebrahimi**

***2/24/2025-version-1***