EHS CLEARANCE FORM
Department of Chemistry
Massachusetts Institute of Technology

Please print neatly

Researcher name: ___________________________ Kerberos username: ______________________

Supervisor name: ___________________________ MIT ID#: ________________________________

__________________________________________
FOR WORK WITH HAZARDOUS SUBSTANCES

RESEARCHER
I have read and understood the contents of the Department Chemical Hygiene Plan and Safety Manual, and I am familiar with the hazards associated with the chemicals in use in my work area. I have taken the on-line training, “Chemical Hygiene & Safety for Chemists EHS00101w”.

I agree to comply with all of the requirements of the Chemistry Department Chemical Hygiene Plan and Safety Manual.

Signature ___________________________ Date __________

SUPERVISOR
I have discussed the Chemical Hygiene Plan and quiz questions with __________________________ and we have also reviewed the hazards associated with the chemicals in use in our laboratory.

Signature ___________________________ Date __________

__________________________________________
FOR WORK THAT WILL NOT INVOLVE HAZARDOUS SUBSTANCES

RESEARCHER
I will not be working in an area in which hazardous substances are in use.

Signature ___________________________ Date __________

SUPERVISOR
__________________________________________ is a member of my group and will not be working in an area in which hazardous substances are in use.

Signature ___________________________ Date __________

All researchers must submit a scanned version of this completed form to Rick Kayser by email (kayser@mit.edu) or by bringing a hard copy to Room 18-281. This must be done before beginning laboratory work.