



This COSA form must be completed for all experimenters working in the CFN and must be submitted to the CFN User Office for badge access. CFN Safety Awareness Policy: Each user must be instructed in the safe procedures in CFN related activities. CFN Facility Laboratory personnel shall keep readily available all relevant instructions and safety literatures.

Employee/Guest Name: Wai-Lin Ng / x7153, Life/Guest Number: ES&H Coordinator/Ext., Email Address: Facility Manager, COSA Trainer: COSA Trainer. Includes checkboxes for Staff, Guest, and User.

STATUS CHANGE:

- Checkboxes for Laser specific training renewal, SOP Revision training (with SOP No. and Revision No. fields), New Laser Orientation training required, and Training requirements reviewed and up to date.

FACILITY SAFETY:

- Checkboxes for Safety personnel, Laser Safety Officers, ESR read and reviewed, Laser SOP Training (with various SOP codes), New Laser User Orientation, Laser System Specific Training, and Further training.

I understand the procedures, operations and safety instructions given to me for this facility and that I must promptly report equipment failures, spills, or off-normal event. I am aware that a willful violation of these procedures and requirements may result in the loss of my access to the facility.

Signature and Date lines for Employee/Guest, Trainer, and User Administration.

- DESIGNATED COSA TRAINERS: Checkboxes for A. Boscoboinik, M. Cotlet, A. Head, M. Liu (checked), D. Nykypanchuk, and X. Tong.