ACCESS/POLICY

☐ F ESR/SAF
Locate and discuss contents, requirements and expectations for experimental and/or assembly work.

☐ F Signs and Placards
Locate and discuss all posted signs and placards (Hazard Info Placard, contact info, PPE)

☐ F Lead Experimenter
Lead Experimenter must ensure that safety, training, and reporting requirements are completed.

EMERGENCIES

☐ F Contact List
Locate and discuss how and when to contact a Floor Coordinator (x5046), the Control Room (x2550), Support Lab Staff and ESH.

☐ F Emergencies
Discuss emergency response and accountability responsibilities. Locate assembly, shelter-in-place areas, exits, and fire alarm pull boxes.

GENERAL SAFETY

☐ F User Authorization
User is authorized to operate ONLY the equipment the user has been trained on - review operation and hazards.

☐ F Activity Cards
Fill out an activity card if you’re leaving your equipment unattended. It must be clearly marked with name, contact info, dates and a brief description.

☐ F Security
Always keep laboratory doors closed and locked. Do not allow "piggy backing".

☐ R Food/drinks
No food or drink allowed in lab.

☐ A Chemicals
Discuss use, labeling, storage, disposal and transportation of chemicals.

☐ A Computer Use
Do not install any computer software on lab computers.

☐ R Moving/Modifying Equip
Do not modify, reconfigure, move, borrow or rearrange any equipment without first consulting with lab CSM.

☐ E Lifting
If lifting objects <30 lbs, keep weight close to the body (between shoulders and knees); If lifting objects =/>30 lbs, use lifting and/or mechanical aids or two-person lifts.

☐ F Electrical Work
No work on exposed electrical components without appropriate procedures and electrical training. Equipment must be EEI inspected BEFORE energized.

☐ A Beryllium
Identify location of beryllium articles or beryllium windows and process for notification in case of breakage.

☐ A Cryogen Use
For cryogen/cryostat use, discuss fill operations, ODH, demonstrate use, wear PPE (eye and skin protection).

☐ A Gas
Show location, operations, use, storage of gas (including cabinets if any), emergency response actions.

☐ A Comp Air/N2 Supplies
Show location of taps. N2 taps must not be left open without flow control. Max N2 flow 20 SCFM, pressure of 30 psi.

☐ A LHe Authorization
Do not use unless authorized and trained.

☐ A Radioactive Source
Do not use unless authorized and trained.

WASTES

☐ F Hazardous waste
Do not generate hazardous wastes without consulting with lab staff (CSM).

☐ F Waste Location
Show relevant waste collection area and discuss proper disposal (sharps, razor blades, pipette tips, broken glass, hazardous waste & the Satellite Accumulation Area/SAA).

CLOSE OUT

☐ F Housekeeping
All equipment, glassware, chemicals, waste are cleaned up, put away and /or properly disposed of. Shutdown all equipment after use and checkout with staff.

☐ F Samples (Store/Ship)
Discuss with lab staff whether to store samples or ship back to home institution and confirm before leaving.
Instructions to Trainer: SAF or ESR #

(1) Provide training for each checkbox to each lab user. If a checkbox does not apply, cross out that line or write N/A. User must be listed on the SAF and/or ESR. Complete information below. Training is valid for 2 years for this lab only. (2) Send completed forms to NSLS-II Training, Building 741, immediately after all users listed on the SAF (who plan to use this lab) have been trained. Training will be entered in the user's training history.

<table>
<thead>
<tr>
<th>PRINT User Name</th>
<th>Life #</th>
<th>User Signature</th>
<th>Date</th>
<th>Trainer's Signature</th>
<th>Training Entered</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Instructions to User: Trainer: Place ✓ next to your name:

☐ Keister, Jeffrey
☐ LaMarra, Steven

Ensure that your name and life number are correct. Sign below that you understand and agree to comply with the instructions provided to you in this training.

[ ] Applicable to this lab   [ ] Determined by ESH   [ ] Facility requirement for ALL labs   [ ] Required for all labs