

For new employees at MIK

Name:

Job position:

Employed from (date):

By signing this document I acknowledge that I have received the necessary training in lab routines that applies for MIK.

- I belong to the _____ group.
- My supervisor/PI is: _____
- The persons responsible for my training period in the lab are:
Lab Manager: _____
And: _____
 - This person is designated for this work by: _____

The different labs and equipment/instruments have a responsible person I can ask for help if I want to ask general questions or require help.

The list for people responsible is given in the info leaflet.

I hereby verify (tick boxes):

- I have read the info leaflet: #170208_INFO ABOUT THE RESEARCH SECTION.doc# available at L:\KDI\MIK\Administrasjon - **MANDATORY**

I have received the necessary information and training about:

- Waste disposal (Ingrid)
- Fire safety (James)
- Evacuation plan (James)
- Protective equipment, and safety routines upon spillage (Huda)
- Ventilated hoods (Luisa E lab, Hazel F lab)
- Use of Eco online (Huda)
- How to register a minor/major Health, Safety, environment (HSE) deviation (Luisa)
- Kitchen/common area (Ingrid)
- General rules of work and tidiness to ensure proper working environment (Ingrid)

I have received the proper training and information and thus cleared to work in these areas/labs:

- Common/main lab (mandatory for all employees)
- Chemical room (mandatory for all employees)
- Cell lab
- Isotope lab
- Single cell lab
- Viral lab
- Histology staining station
- Microscopy

Date:

SIGNATURES:

Head of MIK: _____

Responsible PI: _____

Lab Manager: _____

Person responsible for the training period: _____

Employee: _____