

Orientation and access form for new students, employees and volunteers

Print this form once it is completed and submit it to your departmental / school administration.

Provide the following information:

General contact information:

First name:	Last name:
Employee / Student #:	Phone number / Extension:
uOttawa e-mail:	Alternate e-mail:
Emergency contact:	Emergency contact phone number:
Department:	Supervisor:
Other (specify):	

Status:

Student	Program of study (if applicable)	Professor	Staff
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Training:

The following training is mandatory for ALL paid personnel, students and volunteers:

[WHMIS training](#) (for office or laboratory workers):

[WORKER Health and Safety Awareness training](#):

[Violence Prevention training](#):

[Respect in the workplace training](#):

[Accessibility Standards for Customer Service training](#):

[Working Together: The Code and the AODA training](#):

The following training is mandatory for ALL supervisors:

[SUPERVISOR Health and Safety Awareness training](#):

The following training is mandatory for ALL persons working in a laboratory:

[Laboratory Safety training](#) (for CHG and CVG/Environmental Engineering):

[Dry Lab Risk Management training](#) (for CVG, MCG and EECS):

For other job-specific training courses, visit the Office of Risk Management's webpage on persons working in or near a laboratory or hazardous setting. Consult your supervisor for more information concerning job-specific training required for your tasks.

Key and access card information

Specify building and room number of locations you wish to access.

Room:	Lock:	Card	Key
Room:	Lock:	Card	Key
Room:	Lock:	Card	Key
Room:	Lock:	Card	Key
Room:	Lock:	Card	Key
Room:	Lock:	Card	Key

This section is reserved to the department/school secretariat

Key #:	Deposit:	Date returned:
Key #:	Deposit:	Date returned:
Key #:	Deposit:	Date returned:
Key #:	Deposit:	Date returned:
Key #:	Deposit:	Date returned:
Key #:	Deposit:	Date returned:

For access card requests only:

Do you already have an access card? Yes No
 If yes, specify to which building and room number:

Do you wish to replace an existing access card? Yes No
 Reason:

General laboratory rules

1. Eating, drinking, or storing food is prohibited in the laboratory.
2. Appropriate clothes must be worn: shorts, open toed and open heeled shoes are prohibited. Safety eyewear and laboratory coats must be worn at all times when in the lab or when transporting materials between laboratories.
3. Long hair must be restrained or tied back.
4. Users must agree to follow the [Office of Risk Management directive on after-hours access](#).
5. Do not dispose of anything in the sink. Consult the [Sewer-Use Guidelines](#), the ORM - Environmental Management web page and your supervisor for more information
6. All accidents, incidents or occupational disease must be reported using the online "[Accident, incident, occupational disease or near miss report](#)" form.
7. All spills, incidents or exposures must immediately be reported to the Principal Investigator.
8. No procedure or equipment should be used without proper safety instruction from trained laboratory personnel.
9. All electrical equipment must meet the Ontario Electrical Safety Authority Standards.
10. Untrained people are not allowed in the laboratory. All visitors must wear safety glasses.
11. The laboratory doors must be shut at all times and locked when no one is in the laboratory.
12. Users must be familiar with the Safety data sheets (SDS) for all the hazardous materials they will work with before using them.
13. If emergency treatment is required, take the appropriate SDS with you.
14. Emergency response procedures for fires and chemical hazard and biohazard spills can be found in the [Laboratory Safety Manual](#). Read them in advance!
15. Work surfaces must be cleaned and decontaminated daily. No hazardous chemicals are to be left outside storage cabinets overnight.
16. Hands must be washed with soap before leaving the laboratory.
17. Visit the [Faculty's Health and safety web page](#), the Office of Risk Management (ORM) web page, the ORM - Environmental Management web page, and the ORM's Health and Safety Policies and Guidelines web page.

Fill out the following statements (for all workers)

1. The University of Ottawa's Emergency number is the following:

2. In case of fire, call 5411 and give your name, telephone number, location and the nature of the fire, and Protection will notify the emergency services.
 - a. The nearest fire extinguisher is mounted in the following location:

 - b. The building fire alarm system can be activated at the nearest fire alarm pull station located:

3. All individuals must know the nearest primary and secondary escape routes from their room. An evacuation plan showing these escape routes from the building is in the following location:

4. In case of an injury, first aid kits and designated first aiders should be available to help.
 - a. The nearest first aid kit is in the following location:

 - b. The nearest designated first-aiders is in the following location:

 - c. A list of all designated first aiders is in the following location:

5. [Information concerning the Faculty's Health and Safety staff members can be found online.](#) The Health, Safety and Risk Manager for the Faculty of Engineering is:

6. The Office of Risk Management's Health and safety committee webpage lists the names of all committee members. My representative on the Office Functional Occupational Health and Safety Committee or the Laboratory Functional Occupational Health and Safety Committee is:

Fill out the following statements (for laboratory workers only)

1. The nearest emergency eyewash station is in the following location:

2. The nearest safety shower is in the following location

3. The nearest spill kit is in the following location:

4. Personal Protective Equipment (i.e. respirator, face shield, cold gloves, blast shield, etc.) can be found in the following location:

5. The following hazards, for which training is required, are present in the laboratory (i.e. laser, x-ray diffraction, high voltage, high pressure, flame photometer, NMR, high vacuum pump, etc.):

Information for access card holders:

- Familiarize yourself with the room security system.
- If the card reader light is green you can enter the room without using the card.
- A door held open for more than 120 seconds can trigger the alarm.
- Never hold the door open with an object.
- If you lose your card or have it stolen, report it immediately to your department/school or to Protection Services.
- You are personally responsible for your access card; never lend it, never allow an unauthorized person to access a room with an access card system. If you break this rule you may lose your access privileges.
- Do not access a room without proper authorization; you can lose the right to an access card.

Informed consent for laboratory workers

1. I accept the risks, dangers and hazards inherent in undertaking my research activities. Such risks may include but are not limited to the following:
 - (In the laboratory) Any manner of bodily injury, loss or property damage resulting from the exposure to or direct contact with chemical products, biological samples, specimens, radioactive materials in their original state or as modified or changed by laboratory processes and from hazardous reactions, fires, spills or other hazards resulting from laboratory experiments.
 - (Using equipment) Any manner of bodily injury, loss or property damage resulting from the use, misuse, non-use and failure of any equipment.
2. I have received the appropriate laboratory safety training to conduct my research activities and have read the Laboratory Safety Manual. It is my responsibility to familiarize myself with the contents of the Manual.
3. Access to the laboratory is for the sole purpose of conducting my research activities and I agree not to work alone in the laboratory when potentially hazardous material, equipment or activities are involved.
4. (In the case of a student) I will not undertake any experimental procedure or process that was not discussed or reviewed with the professor and without first having received training, instruction and/or supervision from the professor or someone designated by the professor as competent to train, instruct in or supervise such a procedure or process.
5. That I will take the necessary measures to ensure that no other person uses my key and/or security card to access the University's premises and that I will not give or lend the key(s) and/or security card(s) to other persons.

I agree to return the key(s) and/or access card to the University upon completion of my research activities. I further agree that the University may, at any time, demand the return of the key(s) and/or security card(s) if I fail to comply with any University policy, procedure, regulation or any of the above. I have read and I understand the contents of this document.

Agreement

The University work place health and safety issues are governed by [Policy 72 - Environmental Management and Sustainability](#), [Policy 77 - Occupational Health and Safety](#), and [Procedure 14-1 - Internal Responsibility Procedure for Health and Safety Issues](#). [All University policies and procedures are published online](#). I have read and understood the above policies.

Access card

I have read and confirm that I understand the rules and instructions governing the University of Ottawa access card system. If the use of my card causes a problem or an alarm, authorities can contact me using the information provided. I recognize that Protection Services and my department /school unit reserve the right to cancel my card if I fail to follow the rules and instructions above.

Key

Workspace assigned to me is in proper order, clean, free of unknown products and I understand that I am responsible for keeping it that way during my entire tenure at the University. I will use the key in a responsible manner and I will return it immediately upon leaving. When I will leave, the assigned workspace will be returned in the same condition as at the beginning, and will be inspected before I leave.

Employee / Student: Name: Signature: Date:

Supervisor: Name: Signature: Date:

Administrator: Name: Signature: Date: