

**Bourns B255 & B261 Authorization and Training Certificate**

Name (User): \_\_\_\_\_

ENGR username: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Affiliation (grad/undergrad/etc): \_\_\_\_\_

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The employee/student listed on this form received the following safety training:

- Laboratory Safety Orientation (Fundamentals) 2013 Training
- Hazardous Waste Management Training
- Compressed Gas Safety
- Laser safety

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I certify that I and the employee/student have read and understand the WCGEC Policies and Regulations.

PI Department: \_\_\_\_\_

PI Name (printed): \_\_\_\_\_

PI Signature: \_\_\_\_\_

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**FOR ADMIN USE ONLY:**☐

Lab Walkthrough Checklist performed with Lab Manager

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Requested Access to the WCGEC for use with following equipment:

Lab Manager Conducting Equipment Training: \_\_\_\_\_

Date: \_\_\_\_\_