THERMO Lab Information – Polisher only

Position/title	Print Name Date		
If you are an external user, contact the Bowers Admin first. The following information outlines the steps			
	ry to obtain access to the THERMO lab. Initial next to each line item in both sections A and B.		
	Please collect all necessary signatures on Page 2.		
Section A: Pr	ocess (Initial each one once completed)		
1.	Provide certificates of completion for the following courses:		
	a. Log on here: https://www.learningcenter.ucsb.edu/		
	b. Instructions here: https://optoelectronics.ece.ucsb.edu/certificate-instructions		
	c. Complete: Fundamentals of Laboratory Safety: SBHLSF-LS60-FUND-ECO		
	Laser Safety: <u>SB-UCLOL0028-ECO</u> (If you completed these courses over three years ago from today's date, you will need to redo these courses.)		
2.			
	a. Obtain an Access Card (if you do not already have one) with Door Access at the UCen Information Desk		
	b. Obtain appropriate signatures on an Access Authorization Form		
	(Yellow form for Internal Users/ Purple Form for Outside Users)		
	c. Take signed Access Authorization Form and card to the ECE Shop in Harold Frank Hall, Room 1160		
3.			
	warren@ece.ucsb.edu.) THERMO Training completed on:		
4.	, , ,		
5.	Complete the LHAT/PPE training via https://ehs.ucop.edu/lhat/ .		
6	Read all three sections of the THERMO Chemical Hygiene Plan (rev. 3/2018). Sign the		
	acknowledgment on page 2, that you have read and understood the three sections of the Chemical		
	Hygiene Plan. (http://optoelectronics.ece.ucsb.edu/thermo-lab-information)		
Section B: Us	ser policies and procedures (Initial each one once completed)		
1.	Always use the card readers when entering and exiting lab. Failure to use the exit reader will result in		
	revoked access.		
2.	The lab door is to remain closed, but in the event that it is open or you are following another individual		
	into the lab, you must pass your key card over the readers.		
3.	You must stay in the lab until completion of an experiment. If you need to take a short break, the exit		
4	and entry process must be used each time.		
4. 5.	Preference goes to Bowers' group members for all equipment usage.		
5.	Removal of equipment is only allowed with written permission. Send requests to warren@ece.ucsb.edu and bowers-admin@ece.ucsb.edu .		
6.	Email any equipment issues to warren@ece.ucsb.edu.		
	Lab information will be distributed via email. Forward email address updates to		
	bowers-admin@ece.ucsb.edu.		
8.	Smoking is not allowed in or near any building on campus.		
9.	Pathways and all lab doors must be accessible at all times.		
10			
11			
_	side of the bike path, near the Chemistry Building.		
12			
13	Emergencies related to personal injury or structural issues require a call to 9-911. Follow-up with a		
	call to the FCF Department Safety Representative Paul Gritt at 805-893-5775		

THERMO Lab Information

I have read the above THERMO Lab policies a	nd procedures (both Sections A	and B on Page 1) and agree to abide by			
them and any changes in the future. I further understand that my THERMO lab privileges may be revoked at any time					
and for any reason.	,	, , ,			
Employee/Postdoc/Student/Guest Signature	Print Name	Date			
Email Address	Group/Company				
THERMO Ch	emical Hygiene P	lan (2018)			
	tronics.ece.ucsb.edu/thermo	,			
By signing below, you acknowledge that you I					
THERMO lab and understand the policies and		, -			
change. An updated hard copy will be kept in the lab and soft copies can be found on the measurement computers or group					
website.					
C: (TUEDAG GUDA I		5.			
Signature (THERMO CHP Acknowledgment)	Print Name	Date			
PI/Employer Information:					
Access is only available to academic research groups and companies who actively collaborate with the Bowers group.					
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1. Thermo Lab fees for Polisher Only	: \$20.76/hour	External Hear, CEE 00/hour			
2. Failure to use Exit Reader fees: Maxir		External User: \$55.00/hour			
Internal	User: \$62.28	External User: \$165.00			
3. UCSB will provide monthly invoices w	vith Net/30 terms				
I (the PI/Employer of the person listed above) have read and agree to the above information. I further understand					
that THERMO lab privileges for my user(s) may be revoked at any time and for any reason.					
PI/Employer Signature	Print Name	Date			
Email Address	Company/UCSR Department	Accounting Contact			
Email Address	Company/UCSB Department	Accounting Contact			
		Accounting Contact			
Authorization By Professor John Bowers if no		Accounting Contact			
		Accounting Contact			