Cal Poly Physics – Key/Key Card Agreement

Student Name (print) ____________________________

Last, First, Major ____________________________

This section to be completed by PI/Project Advisor

The above named student is authorized to check out keys for room(s)

(For rooms 634 and 638 signature needed by technician)

Start Date __________ Due Date __________

Check one:
Research ☐
Student Assistant ☐
Other _____________________ ☐

Type of Access:
Standard Access: ☐ 7am-9pm Monday-Friday / rooms 634, 638 and class cards 8am-5pm Monday-Friday
Weekend Access: ☐ May be issued a separate check out key card from 180-640A as needed

Signature Project Advisor: ___________________________ Date __________

Printed Name of Advisor: ______________________________

KEY CARD

This section to be completed by the student

I understand and will comply with the Physics Department Safety Policy and Laboratory Work Rules (listed on back). I understand that failure to complete the checkout procedure and return the key(s) on time (at the due date) will result in a loss of key privileges and I will be charged a $25 fee to my Cal Poly student account.

Student Signature: ______________________________________________________

Date __________

Email ____________________________@calpoly.edu

Phone ____________________________

KEY

This section to be completed by the student

I understand and will comply with the Physics Department Safety Policy and Laboratory Work Rules (listed on back). I understand that failure to complete the checkout procedure and return the key(s) on time (at the due date) will result in a loss of key privileges and I will be charged a $95 fee to my Cal Poly student account.

Student Signature: ______________________________________________________

Date __________

Email ____________________________@calpoly.edu

Phone ____________________________

SECTION TO BE COMPLETED BY DEPARTMENT:

Dept. Safety Training Completed ____________ Key #(last 4 digits) ____________ Returned Date: ____________

Technician Signature _________________________ Lost: Charge Date: ____________ Charge Amount: ____________

Rev 6/2016
Physics Department Safety Policy and Laboratory Work Rules Agreement

- Violation of these policies will result in the revocation of your key card privilege for the rest of the quarter. A second violation will result in permanent revocation of your key card.
- You must receive permission from PI* to work outside of standard working hours of 8am-5pm
- **You must always work with a buddy.** A buddy is defined as someone who is sufficiently familiar with your work and within hailing distance who can aid you in the case of an emergency.
- Researchers must abide by all Cal Poly and Physics departmental safety rules, safety protocols (SOPs) as defined by your PI, as well as policies of the Cal Poly State University Chemical Hygiene Plan. It is the PIs responsibility to ensure that researchers are aware and follow these policies.
- You must follow protocols and perform research approved by the PI. You may not do any lab work outside of these specific procedures.
- Do not use your key card to allow anyone access to the lab. The key card is for your use only. You may not leave the door unlocked or propped open when you are not in the lab.
- Do not eat or drink in the lab. Do not bring food or drink into the lab.
- If you injure yourself in the lab, tell your PI immediately. It is strongly recommended that you report any significant medical condition (allergies, pregnancy, etc.) to your PI before starting work.
- Learn the locations of safety equipment and fire escape routes.
- You must return your key card to the office at the end of the specified quarter.

By signing below, you acknowledge and agree to abide by these rules.

Signature: ______________________________ Date: ______________
Project Student’s Printed Name: ________________________________

I have read and approve the above request. I understand it is my responsibility to enforce current safety policies.

Project Advisor’s (PI) Signature: ______________________________ Date: ______________

*PI stands for Principal Investigator/Project Advisor