

# BUILDING EMERGENCY PLAN CERTIFICATION OF TRAINING

Name of person trained: Roman Ezhov Date: 7/19/2023  
(please print - first name first)

Classification:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Undergraduate Student              | <input type="checkbox"/> Full time Staff | <input type="checkbox"/> Visiting Faculty    |
| <input type="checkbox"/> Graduate Student                   | <input type="checkbox"/> Part Time Staff | <input type="checkbox"/> Visiting Researcher |
| <input checked="" type="checkbox"/> Postdoctoral Researcher | <input type="checkbox"/> Faculty         | <input type="checkbox"/> Other _____         |

Supervisor: Marc Caffee  
(printed name - this can be your immediate supervisor)

**You must be trained in the Building Emergency Plan for every building you work in.**

I work in the following buildings

- ☒ Physics
- ☐ Brown (chemistry)
- ☐ Wetherill (chemistry)
- ☐ Hampton Hall (EAPS)
- ☐ Other \_\_\_\_\_
- ☐ Other \_\_\_\_\_

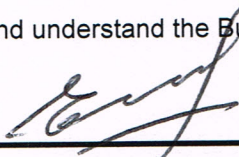
I have read the BEP for the following buildings

- ☐ Physics
- ☐ Chemistry
- ☐ EAPS
- ☐ Other \_\_\_\_\_
- ☐ Other \_\_\_\_\_

CERTIFICATION:

I certify that I have read and understand the Building Emergency Plan(s) indicated above.

Signed TRAINEE:

  
\_\_\_\_\_

Put signed copy of this form in Ken Mueller's mailbox in PRIME Lab.