PRIME Lab SOP CERTIFICATION OF TRAINING

Name of person trained: (please print - first name first)		Date:	Nov	9,	POIC
Classification: Undergraduate Student Graduate Student Postdoctoral Researcher Supervisor: Supervisor: Full time Staff Part Time Staff Faculty Full time Staff Faculty Full time Staff Faculty Faculty	Other				
I certify that I have read and understand the following SC	OPs related to my work.				
USE OF CHEMICALS Concentrated Acid/Base Corrosives Cryogens Flammable materials Pyrophoric/ Water Reactive Oxidizers Sensitizers Toxic materials HF Other Other Other Other	Centrifuges Compressed Gasses Other Other Other				

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