## PRIME Lab SOP CERTIFICATION OF TRAINING

Name of person trained: Teresa Kennell (please print - first name first)	Date: 10-9, 201	8
Classification:  Undergraduate Student Graduate Student Postdoctoral Researcher  Full time Staff Part Time Staff	☐ Visiting Faculty  ☐ Visiting Researcher  ☐ Other	
Supervisor: Greg Chm i  (printed name - this can be your immediate supervisor)		
I certify that I have read and understand the following So	OPs related to my work.	
USE OF CHEMICALS  ✓ Chemicals Stored Above Eye Level	USE OF EQUIPMENT	
Concentrated Acid/Base	Centrifuges	
Corrosives	Compressed Gasses	
Cryogens	Other	
Flammable materials	Other	
□ Pyrophoric/ Water Reactive	Other	
C Oxidizers		
Sensitizers		
Toxic materials		
I✓ HF		
Other		
Other		
Other		
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Signed TRAINEE:	<del></del>	