PRIME Lab SOP CERTIFICATION OF TRAINING

Name of person trained:			Date: 02/17/2023
(please print - fire	st name first)		
Classification:			
Undergraduate Student	Full time Staff	Visiting Faculty	
Graduate Student	Part Time Staff	∇isiting Researcher ■	
Postdoctoral Researcher	☐ Faculty	Other	
Supervisor: Darni Grange	٢		
(printed name - this can be	The state of the s		
I certify that I have read and understa	nd the following SOPs	related to my work.	
USE OF CHEMICALS	USI	OF EQUIPMENT	
Chemicals Stored Above Eye			
Concentrated Acid/Base		Centrifuges	
★ Corrosives	区	Compressed Gasses	
Cryogens		Other	
Flammable materials		Other	
Pyrophoric/ Water Reactive		Other	
Oxidizers			
Sensitizers			
Toxic materials			
™ HF			
Other			
Other			
Other			
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LAY.	andro Osor	<i>i</i> ~ <i>i</i>	
Signed TRAINEE:	VIIIVO VIOTA		