

Student & Post Doc Laboratory Check-out Form

Name of Exiting Student/Researcher (print): _____

Supervisor: _____

Room(s)/Building(s): _____

Work performed: _____

Please initial the items completed, mark NA for items that do not apply:

1	Waste – a request for pick up of unwanted materials has been submitted to EH&S and containers placed in the Satellite Accumulation Area with tags completed.
2	Chemical containers – all chemical containers used by me have been properly labeled and stored.
3	Research Products - research samples and prepared solutions have been transferred within the _____ group. An inventory of transferred materials is attached or located on the computer and includes: experiment number, date prepared, amount remaining and storage location.
4	Biological materials - an inventory of biological materials (cell lines, etc) is attached or located on the computer and includes: detailed instructions and conditions for growth of each, passage number, date, and storage location of each vial.
5	Radioactive materials users – EH&S has been notified of departure so that radioactive materials can be disposed/transferred and the laboratory decommissioned if necessary.
6	Research Documents - notebooks and data records are in order [<i>Notebooks and data are the property of Iowa State University and cannot be removed; however copies can be made for writing up publications.</i>]. The locations and organization of notebooks, data and computer files has been reviewed with my supervisor and data suitable for publication has been identified.
7	Computer files – personal files and software are deleted from computers, research documents and software necessary for viewing images or data remain on computers for analysis.
8	<p>Workspace – personal workspace and equipment used has been cleaned/decontaminated/disinfected. Please indicate that the following locations have been checked and all samples and prepared solutions have been properly discarded or transferred within the _____ group:</p> <p>_____ lab bench (cleaned and organized), _____ refrigerators/freezers, _____ cell culture room, _____ explosion proof freezer/refrigerator, _____ fume and/or biosafety hood, _____ walk-in-cold room &/or freezers, _____ shelves, storage areas _____ ultralow (-80C) freezer,</p>
9	Keys - all keys have been located and returned to General Services. NWRC keys have been returned to NWRC.
10	Other routine or safety-related duties that I am responsible for: _____

new address/ phone #/email:

COMMENTS:

(Signature of Exiting Researcher)

(Date)

Verified By: _____ (Supervisor, lab manager or safety officer)