

AGREEMENT TO FOLLOW LABORATORY SAFETY PROCEDURES AND

RELEASE OF LIABILITY

I wish to utilize the IT Nanofabrication Center both during regular working hours when the laboratory is staffed by University employees and after hours when the laboratory is not staffed by University employees.

I recognize that my research and study in the laboratory may entail handling and disposing of a number of very toxic materials, such as hydrogen, arsine and phosphine gases and other solvents and acids, which may cause severe injury or even death if not handled and disposed of properly. I further recognize that there are pieces of high voltage equipment in the laboratory which also may cause serious injury or death if not operated or otherwise handled according to instructions.

I acknowledge that I have attended the mandatory safety training sponsored by the Nanofabrication Center explaining the dangers and proper procedures for handling the various materials and equipment in the laboratory. I understand the dangers of and proper procedures for handling the various materials and equipment in the laboratory and agree to abide by all safety precautions, procedures, directions, and instructions, which have been communicated to users of the laboratory through the mandatory safety training, written material, posted instructions, and directions in the laboratory and/or verbally through University employees who staff the laboratory. In addition, I agree to follow the cleanroom policies and procedures established by the Nanofabrication Center.

I agree to wear a pair of safety glasses or chemical splash goggles which conform to the ANSIZ87.1-1989 standard, at all times when inside the Nanofabrication Center clean room areas. I also agree to the following disciplinary actions for violation of this agreement. The first violation will result in a verbal warning to the violator by a NFC staff member, followed by a letter to the violator's advisor. The second violation will result in denial of access to the Nanofabrication Center for a period of one month. The third and final violation will result in permanent loss of access privileges.

In consideration of the opportunity to use the laboratory, I, on behalf of myself, my agents, heirs and personal representatives, agree to release the University and its agents and employees from all responsibility or liability for personal injury, including death, and damage to or loss of personal property, which I may incur due to my failure to follow any safety precautions, procedures, directions, and/or instructions communicated to users of the laboratory and/or due to my own negligence in handling of operation materials and/or equipment in the laboratory. This release does not apply to personal injury, including death, or property damage or loss caused by the negligence or intentional misconduct of the University and its employees and agents.

I, the undersigned, am at least eighteen (18)* years of age, am competent to sign this release, and have read carefully and understand all of its terms.

Signed _____ Date _____

Name (please print) _____

*Guardian signature _____ Date _____

(If under 18 years of age)