**נספח ד' – On-the-bench Safety Training Form**

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| --- | --- | --- |
| **Room number/s:** | **Bldg.:** | **Faculty / Unit:** |
| **ID / Passport number:** | **Name of Person Instructed\*:**  **(\*please sign at the end of the form)** | |
| **Date:** | **PI:** | **Name of Instructor:**  **(\*please sign at the end of the form)** |

**Mark 'V' near each subject which was instructed:**

|  |  |  |  |
| --- | --- | --- | --- |
| **#** | **Subject** | **Instruction Preformed** | **Date** |
| **1** | **Location of the fire exits from the building** |  |  |
| **2** | **Location of safe areas and shelters in the building** |  |  |
| **3** | **Location of fire extinguishing positions in the lab and building specifically the closest fire extinguishing position** |  |  |
| **4** | **Location of the floors spill kit and acquaintances with the spill kits content** |  |  |
| **5** | **Location of the first-aid cupboard and acquainting with its content** |  |  |
| **6** | **Location of the lab electricity cupboard and its use** |  |  |
| **7** | **Location of the gas, water DDW main faucet valves in your lab** |  |  |
| **8** | **Location of the lab's distress button** |  |  |
| **9** | **Acquaintance with the lab's personal protective equipment** |  |  |
| **10** | **Risks involve in working with biological agents, radioactive sources, and hazardous substances - mainly point on hazardous materials the trainee intends to work with. Please refer to the SDS - Safety Data Sheet.** |  |  |
| **11** | **Work and shuttling of cryogenics** |  |  |
| **12** | **Work with compressed gas cylinders** |  |  |
| **13** | **Working with Ethidium Bromide** |  |  |
| **14** | **Work with open flame** |  |  |
| **15** | **Risks involved with soldering (report to the Safety due to potential lead exposure)** |  |  |
| **16** | **Risks involve working with autoclave** |  |  |
| **17** | **Work with devices located in the infrastructure faculty area** |  |  |
| **18** | **Working with lab equipment** |  |  |
| **19** | **Safe storage of chemicals** |  |  |
| **20** | **Work with benzene (report to the Safety due to potential benzene exposure)** |  |  |
| **21** | **Work with Mercury (report to the Safety due to potential mercury exposure)** |  |  |
| **22** | **Working with HF / Piranha** |  |  |
| **23** | **Working with Pyrophoric Materials / Alkali Metals / Hydrogenations** |  |  |
| **24** | **Proper use of Biosafety Cabinets and Chemical Hoods** |  |  |
| **25** | **Working with pathogens** |  |  |
| **26** | **Working with animals** |  |  |
| **27** | **Working with glassware** |  |  |
| **28** | **Working with needles / sharps** |  |  |
| **29** | **Handling chemical waste** |  |  |
| **30** | **Handling biological waste** |  |  |
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| **Date** | **Instruction Preformed** | **Additional Safety Training Topics (specifically lab-related)** | **#** |
|  |  |  | **1** |
|  |  |  | **2** |
|  |  |  | **3** |
|  |  |  | **4** |
|  |  |  | **5** |
|  |  |  | **6** |
|  |  |  | **7** |
|  |  |  | **8** |
|  |  |  | **9** |
|  |  |  | **10** |

**Remarks/Clarifications:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The instructor approves by signing, that a safety instruction has been conducted on the V-marked topics.**

**Instructor signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Attention! The person being instructed hereby declares by signing that the material instructed upon has been understood/**

**The person being instructed signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**