

## Appendix G

### CHEMICAL HYGIENE PERMIT

STUDENT REQUESTING PERMIT: \_\_\_\_\_

PHONE NUMBERS: HOME \_\_\_\_\_ CELL \_\_\_\_\_

NAME OF SUPERVISOR: \_\_\_\_\_

SUPERVISOR'S PHONE NUMBERS: HOME \_\_\_\_\_ CELL \_\_\_\_\_

TYPE OF WORK PROCEDURE (CHECK AS APPROPRIATE):

HAZARDOUS OPERATION  WORKING ALONE  OFF HOURS  UNATTENDED OPERATION

PERMIT IN EFFECT FOR (CHECK APPLICABLE TERM): AY  FALL  SPRING  SUMMER

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Describe the procedures for which this permit is proposed:

Describe any special hazards involved and safety precautions to implement.

**Plan safety measures for unexpected events such as power outage, water hose break, water shut down, earthquakes, etc.**

**Please submit completed form to the College of Science Office, SC N131.**

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

APPROVAL OF SUPERVISOR: \_\_\_\_\_ DATE: \_\_\_\_\_

APPROVAL OF DEPT CHAIR: \_\_\_\_\_ DATE: \_\_\_\_\_