

Iowa State University Shop/Tool Use Safety Agreement

All shop users must complete and sign this form. Shop Supervisors are to keep this form on file. See reverse for records of tool authorizations and course completions.

Name (print)		ISU #	Date
Email Address			
Faculty/Shop Supervisor		Department	
<input type="checkbox"/> Undergraduate	Class	College	Major
<input type="checkbox"/> Graduate Student	Year entered ISU Graduate School	<input type="checkbox"/> Postdoc <input type="checkbox"/> Faculty or Staff Member	

I have read the shop safety rules and understand them as they apply to my work in the Shop/Lab areas. Specifically:

1. I agree to abide by the published and posted safety rules and accept personal responsibility for my work in shops and laboratories. I will abide by any and all additional local shop rules. I understand that my failure to do so can result in my loss of privileges in the shop/lab areas.
2. I understand the shop access rules, monitor/supervision requirements, and shop hours and understand that shop may be subject to video monitoring.
3. I will wear safety glasses at all times while in the shop, unless otherwise designated.
4. I understand what attire is required to work in the shop and will not enter the shop unless so attired.
5. After use, I will clean and maintain all equipment, floors and benches I use.
6. I will not attempt to use any machine, tool or equipment that I do not have written permission to use. I will ask for instruction and/or training before using any machine, tool or equipment with which I am not familiar.
7. I will check in with the supervisor or monitor upon entering or leaving the shop, and prior to operating any machinery.
8. Any equipment or tooling I find in need of repair or that I damage, I will promptly notify the monitor or supervisor and I will leave the prominent cautionary tag on the machine listing my name, research group or class, and a phone number or email address where I can be reached.

Certification: I understand that it is a privilege and learning opportunity to use the shop/lab areas and agree to abide by all University regulations and stipulations placed upon me as conditions for working in these areas.

Signed	Date
Shop Supervisor	Date

