

APPENDIX 5-B

Cole Science Center

NOTIFICATION OF USE OF PARTICULARLY HAZARDOUS SUBSTANCES

HAZARD CATEGORY:	<input type="checkbox"/> SELECT CARCINOGEN
	<input type="checkbox"/> HUMAN REPRODUCTIVE TOXIN
CHEMICAL NAME:	_____
CAS #: (if known)	_____
USED IN :	<input type="checkbox"/> RESEARCH – List Faculty Name _____ ext:_____
	<input type="checkbox"/> STUDENT LABORATORIES Course _____ Responsible Faculty _____ _____ _____
AREA OF USE:	_____
STORAGE AREA:	_____
USED ONLY IN FUME HOOD:	<input type="checkbox"/> YES <input type="checkbox"/> NO
APPROXIMATE QUANTITY USED:	PER EXPERIMENT _____ PER WEEK _____
Requirements for the use of Select Carcinogens and Reproductive Toxins are described in those sections of the Safety Manual. The Safety Committee may request a written protocol or other additional information upon review of this Notification.	
Signature	_____
Date:	_____
	Return to Lab Manager