



SAFETY FORM

APPLICATION TO USE LABORATORY EQUIPMENT

DEPARTMENT OF ELECTRIC AND ELECTRONIC ENGINEERING
FACULTY OF ENGINEERING, UNIVERSITI PUTRA MALAYSIA

ATTENTION

- A. Applicant must abide by all the laboratory rules and responsible for the cleanliness and safety of the equipment.
B. Application from other Department/Faculty must be supported by the respective Head of Department/Dean.
C. For Application to Borrow Lab Equipment, applicant should also fill-up Borang Kebenaran Pelepasan Peralatan SOK/PYG/BR15

A. APPLICANT DETAILS

Name		Matric No.	
Email Address		Phone No.	
Project Title		Academic Year	20____ / 20____
Supervisor		No. of semester	
Faculty / Department	<input type="checkbox"/> Department of Computer and Communication Systems Engineering <input type="checkbox"/> Others Faculty: _____ Dept.: _____		
Designation	Staff / PhD / Post Doc / MSc / Bachelor/ Research Assistant *	Activity	Teaching / Research / Bachelor Project *
Laboratory	<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> IC Design Lab. <input type="checkbox"/> Electrical and Electronic Technology Lab. <input type="checkbox"/> Control and Automation Lab. <input type="checkbox"/> Microprocessor Lab. <input type="checkbox"/> Modeling and Simulation Lab. <input type="checkbox"/> Microelectronic and Nanoelectronic Lab </div> <div style="width: 48%;"> <input type="checkbox"/> Electrical Power Lab. <input type="checkbox"/> Electronic Power Lab. <input type="checkbox"/> High Voltage Lab. <input type="checkbox"/> Robotic and Intelligent Technology Lab. <input type="checkbox"/> Flexible Printed Electronic Lab </div> </div>		

B. WORK EXPERIMENT DETAIL

Equipment to be Used		Type of Testing	
Work Schedule	Date		
	Time		
<i>Note: Please confirm the available time with Laboratory Staff</i>			

C. RISK ASSESSMENT

*This Risk Assessment must be completed by a **lab user** and checked by a competent assessor/supervisor for any procedure of work carried out before an attempt is made at the procedure of work.*

Name of Experiment			
Describe Work Procedures	Expected Hazard		
	Risk of Injury and its Severity		
	Who is at Risk?		
Measures to be Taken	Emergency Action		

Training pre-requisites		Reference (if any)	
D. PERMISSION FOR WORKING OUTSIDE OFFICE HOURS (if related)			
Reason for Working Outside Office Hours			
Accompany's Name	<input type="checkbox"/> Postgraduate <input type="checkbox"/> Undegraduate <input type="checkbox"/> Staff		Matric / Staff No.
E. SAFETY DECLARATION			
1. I have read and understood The Department's Laboratory Safety Handbook & Laboratory Safety Notes. 2. I have received basic training in the use of the listed equipment (including Safety Equipment, SOP), Emergency Procedures, and First Aid Kits. 3. I have completed the Risk Assessment (in Part C) of my research. 4. "I hereby declare that I will be responsible for all incidents, any damage and loss of the equipment. The Department of Electric and Electronic Engineering shall not deem liable for any accidents occur due to safety negligence during and after working hours."			
APPLICANT'S SIGNATURE		SUPPORTED BY SUPERVISOR	
Signature: Date:		Signature & Stamp: Date:	
F. VERIFICATION			
(To be filled in by ASSISTANT ENGINEER of Laboratory) Remark: Signature & Stamp: Date:		(To be filled in by HEAD OF LABORATORY) Remark: Signature & Stamp: Date:	
G. APPROVAL (FOR OFFICE USE)			
(To be filled in by HEAD OF DEPARTMENT)			
<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Comment: _____			
Signature & Stamp: Date:			
Laboratory Staff Remark (Upon Completion): _____ _____ _____			

DEPARTMENT OF ELECTRIC AND ELECTRONIC ENGINEERING

LABORATORY SAFETY NOTES

GENERAL INSTRUCTION :

1. YOU ARE RESPONSIBLE NOT ONLY FOR YOUR OWN SAFETY BUT ALSO FOR THE SAFETY OF OTHERS !”
2. AS POSTGRADUATES YOU WILL BE EXPECTED TO SHOW A GREATER UNDERSTANDING FOR AND ADHERENCETO, ALL NATIONAL AND LOCAL SAFETY RULES AND REGULATIONS.

Please comply with the following:-

1. Laboratory times : 9.00am–5.00pm. Working in a laboratory alone out of hours is not permitted.
2. Although you may be admitted into a laboratory you are not allowed to commence work unless authorised to do so by a supervisor/assistant engineer.
3. Ensure the cleanliness of the equipment is always maintained. Attired all the time
4. You must wear proper personal protection equipment (PPES) that needed and suitable with your lab works.
5. Make sure the PPE storage location and method of use, i.e. *Fire Extinguishers, Eyewash Bottles, and First Aid Kits*.
6. Familiarise yourself with the layout of the building and its fire escapes.
7. Do not eat, drink, or smoke in the laboratory.
8. In the event of an accident, it is essential that any injury be reported to an assistant engineer as soon as possible. A report of the accident will then be forwarded to the departmental safety representative.
9. Report all accident/spillages to a supervisor/ assistant engineer.
10. Do not dispose of unknown chemicals down the laboratory sink. Refer supervisor/ assistant engineer for advice.
11. Follow the instruction from time to time by Laboratory/Department/University.

ALWAYS REMEMBER

DO NOT USE ANY EQUIPMENT, UNLESS YOU ARE ABSOLUTELY CERTAIN OF ITS CORRECT METHOD OF OPERATION & DO NOT HESITATE OR FEEL EMBARRASSED ABOUT ASKING FOR HELP.

“BE SAFE NOT SORRY”

