

Air Reactive (Pyrophorics) SOPs Signature Page

My Faculty/Laboratory Supervisor has reviewed the Air Reactive (Pyrophorics) SOPs with me. I have read all the materials in the Air Reactive (Pyrophorics) SOPs. I understand this material and how it applies to the laboratory in which I will be working with pyrophoric chemicals. I realize I must follow these SOPs closely to ensure my own safety, and that of my fellow laboratory mates and Faculty/Laboratory Supervisor. I have familiarized myself with the location of safety equipment contained in the laboratory, and I have asked for clarification of those points I did not understand.

Date: _____

Student Name (Please Print): _____

Signature of Student: _____

Faculty/Laboratory Supervisor (Please Print): _____

Signature of Faculty/Laboratory Supervisor: _____