APPENDIX A: LABORATORY SAFETY COORDINATOR

THE UNIVERSITY OF TEXAS AT AUSTIN
Laboratory Safety Coordinator

College/Department
Name: 

Laboratory Safety Coordinator (LSC)
Name: 

EID: _________________

LSC Address: Building: ________ Room: ________

Phone Number: ________ Campus Mail Code: ________

Each college, department, organized research unit that has laboratories using hazardous materials should designate a Laboratory Safety Coordinator to carry out the duties and responsibilities of the LSC described in the Laboratory Safety Manual.

The individual identified above has been appointed LSC and has accepted the responsibilities and duties associated with this appointment.

Appointing official: Laboratory Safety Coordinator: 

______________________________  ______________________________
Dean, Department Chair, or ORU Director     Signature

___________________     ___________________
Date         Date

A copy of this form shall be: placed in the appropriate LABORATORY SAFETY MANUALS, retained in the Dean's Office and by the Department Chair or ORU Director, and submitted to Environmental Health and Safety.