Laboratory Safety Manual Read Receipt

I __________________________________________________________, n° mec/ ist-id ______________ declare that:


• I have read the Laboratory Safety Manual, understood all of its contents, including safety rules, rules of conduct as well as use of spaces, equipment and materials;

• I will identify and report to DEQ´s Head of Department, the aspects in the laboratory (s) I use and that seem not to be in compliance with the Laboratory Safety Manual.

Lisboa, ____/______/______

User: __________________________________________________________

Lab. Safety Responsible: _________