

General Laboratory (i.e., Labs, Studios, Shops) Reopening Request

Applicant: _____ Date: _____

Contact Info: Office: _____ Phone: _____ Email: _____

1. Specific Details Regarding Access (append additional sheets if necessary).

a) What Labs/Studios/Shops will be needed (please attach Lab/Studio/Shops Safety Checklist):

b) List of all the individuals who will be accessing the above areas (faculty, students, and staff):

c) List specific activities to be performed:

d) Please outline all lab-specific safety measures:

e) Planned use of PPE due to Covid-19 for lab-specific activities:

f) Please list any additional lab-specific safety considerations:

g) Please outline plans for cleaning/sanitizing labs and research work spaces:

h) Please provide plan for reducing density of personnel in the labs and how social distancing will be maintained:

2. Compliance

a) Affirmation that all personnel listed agree to follow the RIT Workplace Safety Plan (<https://www.rit.edu/coronavirus/workplace-safety-plan>), watch EH&S video on how to wear a face covering (<https://www.rit.edu/coronavirus/face-covering>), and how to use PathoCide (<https://www.youtube.com/watch?v=aWV5WJk0OII>). Initial _____

b) Affirmation that logs of personnel entering labs will be maintained (who, where, when). Initial _____

3. Approvals and Commitment Signatures

Applicant

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X Date	X Date
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X Date

Vice President for Research