

## Policy and Safety Acknowledgement Form

For more information about NMR Facility policies and safety or a more detailed explanation of the guidelines and rules, please talk to Dr. Hongjun Zhou before turning in this completed form.

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I hereby acknowledge that I have read, understand and agree to observe the [policies and safety guidelines posted on the Facility website](#) when working in the UCSB Department of Chemistry and Biochemistry NMR Facility. I also understand that violation of the safety guidelines or Facility policies may result in the termination of my user privileges.

USER FULL NAME (PRINT): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

FOR OFF-CAMPUS INSTITUTION ONLY:

• NAME OF INSTITUTION: \_\_\_\_\_