**Resigning Lab Supervisor/Principal Investigator Form**

This form is to be completed by a Principle Investigator/Lab Supervisor who is resigning or otherwise leaving their role, in order to ensure that any hazardous materials or equipment under their control are either disposed of appropriately or transferred to the control of another appropriate person.

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| **Lab Supervisor/PI Name:** | **Department:** |
| **Date Resigning/Finishing as PI:****/ /** | **Laboratory Room Number(s) PI is responsible for:** |

**Instructions:** The PI concerned should:

* Check each item below and where applicable, discuss with person indicated.
* Document the arrangements being made to address each applicable item (or mark as ‘Not Applicable’ or ‘N/A’ if they do not apply).
* Have the indicated person sign the relevant section to confirm that they are satisfied with these arrangements.
* Return the completed form to your Departmental Laboratory Manager for their records.

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| **Part A: Hazardous Substances** [ ]  **Not Applicable**What arrangements are being made for any Hazardous Substances (chemicals, including gas cylinders) you are responsible for? *Please discuss this with your Departmental Laboratory Manager*. |
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| Approved by: |
| DLM Name: | DLM Signature: | Date: |

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| **Part B: New Organisms/Imported Risk Goods** [ ]  **Not Applicable**What arrangements are being made for any New Organisms/Imported Risk Goods (Uncleared Biologicals) you are responsible for? *Please discuss this with your Sector Manager.* |
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| Approved by: |
| Sector Manager Name: | Sector Manager Signature: | Date: |

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| **Part C: Sources of Ionizing Radiation (e.g. radionuclides, X-ray equipment)** [ ]  **Not Applicable**What arrangements are being made for any sources of ionizing radiation you are responsible for? *Please discuss this with your Radiation Licensee or the Radiation Safety Advisor (Health and Safety Office).* |
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| Approved by: |
| Licensee /RSA Name: | Licensee /RSA Signature: | Date: |

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| **Part D: Other hazardous materials or equipment** [ ]  **Not Applicable**Are there any other hazardous materials or equipment you are responsible for and if so, what arrangements are being made for these? (E.g. infectious organisms that are not New Organisms/Imported risk goods, lasers). *Please discuss this with your Departmental Laboratory Manager.* |
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| Approved by: |
| DLM Name: | DLM Signature: | Date: |