

# PSFC Safety Briefing Form

Name: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Division & Group: \_\_\_\_\_ Starting Date: \_\_\_\_\_  
Title: \_\_\_\_\_ Date of Briefing: \_\_\_\_\_  
Room: \_\_\_\_\_ MIT ext. \_\_\_\_\_  
Email address: \_\_\_\_\_ Kerberos ID: \_\_\_\_\_  
Briefing supervisor assigned by employee's supervisor: \_\_\_\_\_

## Employee Type

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Permanent Employee | <input type="checkbox"/> UROP/Sr. Thesis        | <input type="checkbox"/> Visiting Scientist |
| <input type="checkbox"/> Student Hourly     | <input type="checkbox"/> Graduate Student       | <input type="checkbox"/> Voucher Employee   |
| <input type="checkbox"/> Temporary Employee | <input type="checkbox"/> Other (specify): _____ |   |

**The above named person has been briefed on safety and occupational hazards associated with this Division's research group and his/her proposed program of work. This safety briefing included the following:**

Initials of Briefing Supervisor

### 1. General Safety Policies and Practises:

(Employee given the "Notice to All PSFC Personnel document" and the "Safety Equipment Available to PSFC Employees" list)

\_\_\_\_\_

### 2. Tour of Work Area

\_\_\_\_\_

### 3. Emergency Procedures:

Pull stations and locations, fire exits, gas leaks, electricity, flooding accident

\_\_\_\_\_

### 4. Hazardous Areas:

Experimental areas, power rooms, high voltage areas, machine shop and electronics shops

\_\_\_\_\_

### 5. Safety Inspections and Individual Responsibility

\_\_\_\_\_

### 6. Suspicious Persons Procedures

\_\_\_\_\_

### 7. Safety Violations Procedures

\_\_\_\_\_

### 8. Housekeeping Requirements

\_\_\_\_\_

### 9. Personal Protective Equipment Requirements

See the PSFC Chemical Hygiene Plan for lab specific requirements (<http://psfcwww2.psfc.mit.edu/esh/chpcont.html>)

For additional information on safety equipment, see "Safety Equipment Available" notice available through PSFC Personnel (NW16-212) or the PSFC Office of ES&H (NW21-214).

\_\_\_\_\_

- |  |   |                                       |
|--|---|---------------------------------------|
| <input type="checkbox"/> Safety Glasses        | <input type="checkbox"/> Hearing protectors/muffler | <input type="checkbox"/> Safety Shoes |
| <input type="checkbox"/> Hard Hat              | <input type="checkbox"/> Respirator                 |                                       |
| <input type="checkbox"/> Splash Goggles        | <input type="checkbox"/> Film Badge or TLD          |                                       |
| <input type="checkbox"/> Other (specify) _____ |   |                                       |

**10. This person is required to attend the following PSFC Safety Seminar Courses:**

- General Safety, Fire Safety, Materials Handling, Accident Reporting, VDT Safety (all)
- General Lab Safety (monthly seminar series includes: PSFC Hazards, Electrical Safety, Chemical Safety Machine Shop Safety, Laser Safety, Radiation Safety)
- CPR Certification
- Is there a possibility that this person will be in the area in which a laser is operating? (If yes, the Laser Eye Exam is required)
- Laser Training
- Radiation Training
- Electrical Safety Training
- Microwave Training
- Confined Space
- Respirator
- Badging

**Signature and Concurrence**

**New Employee/student** \_\_\_\_\_ **Date** \_\_\_\_\_

**Briefing Supervisor** \_\_\_\_\_ **Date** \_\_\_\_\_

**Supervisor** \_\_\_\_\_ **Date** \_\_\_\_\_

All new PSFC personnel must return this form within one week of the start of employment or student project to Matt Fulton NW21-214 or Nancy Masley NW21-215. Issuance of laboratory keys and/or MIT ID's will be contingent upon completion of this form. Issuance of first and subsequent paychecks may be contingent upon completion of this form.

Completion of the online safety needs assessment is required within seven days. To complete this go to [web.mit.edu/environment/training/](http://web.mit.edu/environment/training/). Failure to do so may result in temporary suspension of lab access.

Date form returned \_\_\_\_\_

xc. Financial Administrator, NW16-206 (voucher or student payroll)  
Human Resources, NW16-212 (Employee or Visitors)