### Appendix A

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| A close up of a logo  Description automatically generated | **LAB USER**  **DECLARATION FORM** | |
| **Full Name:**  (Please use block letters) | | **Department & Faculty:** |
| **NRIC / Passport No.:**  **Nationality:** | | **Student / Staff Matric No.:**  (If applicable)  **Name of Supervisor:** |
| **Position** (Tick where applicable)  ( ) **Staff (Academic / P&P)** ( ) **Lab and Support Staff**  ( ) **Visiting Professor** ( ) **Senior Research Fellow**  ( ) **Post-Doc.** ( ) **Research Fellow**  ( ) **Student (Postgraduate)** ( ) **Research Assistant**  ( ) **Student (Undergraduate)** ( ) **Other:** (specify) | | |
| **Declaration**  I, the above named, declared that I have read and understood the UM safety handbook and shall carry out my work in a safety conscious environment in compliance with all regulations as laid down by Universiti Malaya.  <https://www.um.edu.my/docs/default-source/office-of-safety-and-health/um-safety-handbook.pdf>  https://www.um.edu.my/about-um/administration/registrar-s-office/occupational-safety-health-unit  In the event of an accident which is due to my negligence and/or non-compliance with Universiti Malaya safety regulations and procedures, I will indemnify the Universiti Malaya on all liabilities. | | |
| Signed: ………………………………… Date: …………………  Witnessed By:…………………………………. Date: ………………….  (Academic Supervisor/Head of PTj, *signed & stamped*) | | |
| ***IMPORTANT NOTICE:***   * *All lab users MUST complete and sign this form before they are allowed to work in the laboratories / workshops.* * *All users MUST complete 2 copies during registration / enrolment and return the forms to the Institute of Research Management & Services’s Office (IPPP) for retention in respective lab file and with the Quality Managemetn System Committee. Failure to do so will render the registration incomplete and the user will be barred from working in the laboratories / workshops.* | | |

*University of Malaya / DVC (R&I) Lab User Declaration Form 2019*