Welcome to Texas Tech University Health Sciences Center El Paso. As part of an ongoing effort to maintain a safe work environment for TTUHSC El Paso employees and students, the Department of Safety Services gives you an opportunity to learn about safety-related information that applies specifically to your work area. Please take time to answer the following questions to be better informed and prepared. Return this form to the Safety Services office within five days of completing New Employee Orientation.

Name: ________________________________ Department: ________________________________
eRaider: ________________________________ Status (circle one): Employee  Volunteer  Student

1. Name of Unit Safety Officer: _______________________________________________________

2. The location of the following emergency equipment closest to my primary work area:
   A. Fire alarm pull station ____________________________________________________________
   B. Fire extinguisher ________________________________________________________________
   C. Outside reassembly area _________________________________________________________
   D. Interior shelter area _____________________________________________________________
   E. First-aid supplies ______________________________________________________________
   F. Nearest AED (Automatic External Defibrillator) ______________________________________
   G. Eye wash station (in lab) ________________________________________________________
   H. Safety shower (in lab) __________________________________________________________

3. Chemical Safety Data Sheet (SDS) can be accessed ________________________________

4. Department code word(s) for security ______________________________________________

5. Nearest hand-washing facilities ____________________________________________________

6. Location of personal protective attire/equipment (PPA/PPE) ____________________________

7. I have received training regarding OP75.16 Fire and Life Safety; including the content of both Attachment B and D.

8. I have been made aware of the following hazards in my area (circle all that apply). Additional training will be provided by responsible personnel as needed.

   - Sharps container
   - Hazard chemicals
   - Gloves
   - Pallet jack
   - Forklift
   - Power tools
   - Centrifuge
   - Fume hood
   - Biological safety cabin
   - Clean air bench
   - UV light source
   - Electrophoresis equipment
   - Biohazard waste
   - Gas Cylinders
   - Select agents (specify)
   - Other (specify)

EMPLOYEE SIGNATURE: ________________________________ DATE: _______________________
SUPERVISOR or USO SIGNATURE: ________________________________ DATE: ___________________

Texas State Government Privacy Policies (Government Code): 1) With few exceptions, you are entitled on request to be informed about the information the state government body collects about you; 2) Under Section 552.021 & 552.023, you are entitled to receive and review the information; and 3) Under Section 552.004, you are entitled to have the state government body correct information about you that is incorrect.