SCIENCE LABORATORY DEPARTURE CHECKLIST

The Laboratory Close-out process helps ensure that labs are always in good working order, and items are not left behind when you leave. It is very common for something to be forgotten in the busy time before graduation or ending a work term in a lab; this process helps ensure nothing gets missed.

In order to guarantee the process is completed properly, and does not interfere with the timing of your departure, please begin this process well in advance of your anticipated departure. Complete the items listed below, meet with your supervisor to discuss the items and sign off on their satisfactory completion. You should contact your departmental technician at least two weeks prior to your planned departure to see if they are able to schedule a time to meet with you to verify that all items are completed.

Date: ____________________ Name of departing laboratory personnel (please print clearly):

____________________________

ID number of departing laboratory personnel: __________________________

Supervisor name (print clearly): ________________________________

Building: __________ Room numbers: _______ Department: __________________________

<table>
<thead>
<tr>
<th>REQUIREMENT</th>
<th>YES or N/A</th>
<th>COMMENTS</th>
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<tbody>
<tr>
<td>1. Have shared storage units such as refrigerators, freezers, cold rooms, stock rooms, etc. been properly surveyed in order to locate and appropriately dispose/designate remaining chemicals and/or biological materials?</td>
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<td>2. Have you noticed any unknown chemicals in the lab? (These can be removed by Health, Safety &amp; Wellness)</td>
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<td>3. Are all chemical containers properly labeled? (Workplace labels present if not in original container)</td>
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<td>4. Are all chemicals inventoried and barcoded?</td>
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<td>5. Are all containers securely closed and in good condition?</td>
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<td>6. Has all glassware been emptied and the contents properly disposed? (Remember to check refrigerators, freezers, cold rooms, fume hoods, biological safety cabinets, bench tops, storage cabinets, stock rooms, etc.)</td>
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<td>7. a) Have you determined which chemicals and compressed gas cylinders are usable and transferred responsibility for those materials to another party who is willing to take charge of them?</td>
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<td>b) If a new user cannot be found, have the materials been disposed of in accordance with the University of Regina hazardous waste disposal procedures?</td>
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<td>8. Were non-transferable compressed gas cylinder connections removed, cylinder caps replaced, and cylinders returned to suppliers?</td>
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9. Were chemicals targeted for hazardous waste disposal prepared by following University of Regina hazardous waste disposal procedures?

10. Have all biological materials been disposed of properly?

11. Has a list of disposal chemicals been sent to Health, Safety & Wellness?

12. a) Has all laboratory equipment been cleaned or decontaminated?
   
   b) Were fume hood surfaces and bench tops washed?

13. a) If laboratory equipment is no longer working and needs to be discarded, have you contacted your salvage representative to inform them of these items?
   
   b) Have you decontaminated / cleaned the equipment?
   
   c) Have you labeled / tagged the equipment as "salvage"

14. a) Have all borrowed equipment and chemicals been returned?
   
   b) Are manuals, software and maintenance records retained with the equipment?

15. Have you cleaned your office area? All papers are recycled? No boxes or garbage are left behind?

16. a) Have your computer passwords been deleted or given to your supervisor?
   
   b) Has any unfinished work been forwarded to the necessary people?
   
   c) Has your lab notebook been turned over to your supervisor?

17. Have you contacted your departmental technician to submit your lab coat for cleaning or disposal?

**NOTE:** If any radioactive material was used in the lab, you must contact the Radiation Safety Officer (health.safety@uregina.ca).

**Forwarding Address & Contact Information for Departing Personnel:**

<table>
<thead>
<tr>
<th>Mailing Address:</th>
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<table>
<thead>
<tr>
<th>Phone number:</th>
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| Email:           |  |
REQUIRED SIGNATURES:

______________________________  ________________________________
Departing Lab Personnel*                     Date

______________________________  ________________________________
Supervisor*.1                        Date

______________________________  ________________________________
Departmental Technician (or designate)2                     Date

*By signing this checklist, you are declaring that all items have been addressed. A lack of signature would mean that the lab has not been departure process was not completed properly. Therefore, the transfer of lab equipment to departing staff will be delayed, and approval of your thesis defense can be withheld, as well as final paychecks and/or lab usage/ key deposit.

1Undergraduate students and volunteers can have a graduate student sign this line instead
2Undergraduate students and volunteers can have the supervisor/PI sign this line instead

Once completed, bring this form to Science Student Services along with your lab and office keys to get your refund and finalize the lab departure process.

______________________________  ________________________________
Student Services                     Date