

Safety Compliance Form  
College of Veterinary Medicine  
Kansas State University

Please initial applicable statements:

For all CVM employees:

\_\_\_\_\_ I agree to complete and maintain the safety requirements as set forth by the Department of Environmental Health and Safety, as well as federal and state guidelines to create the safest working conditions possible.

\_\_\_\_\_ I have taken the online safety courses that pertain to my scope of work.

\_\_\_\_\_ I am familiar with the web site for the Department of Environmental Health and Safety and have reviewed it and am aware of the policies covering workers here at Kansas State University.

\_\_\_\_\_ I am aware that I must attend one session of the Hazardous Waste Awareness class sponsored by the Department of Environmental Health and Safety.

\_\_\_\_\_ I have gone over safety procedures particular to the area in which I am currently working.

In addition, for CVM employees in laboratories:

\_\_\_\_\_ I have read and understand the Kansas State University manual "Prudent Practices in Laboratory Safety"

\_\_\_\_\_ I understand that if my job requires working with animals or human blood there are additional forms to be filled out and filed with the University Research Compliance Office.

\_\_\_\_\_ I understand that if my job requires working with radioactive materials, there are additional rules and guidelines not listed here that I must follow, and I must contact the campus Radiation Safety Office.

\_\_\_\_\_ I have viewed and understand the material presented in the safety videos on the CVM intranet site.

\_\_\_\_\_  
Print Name of Employee

\_\_\_\_\_  
Print Name of Supervisor

\_\_\_\_\_  
Signature of Employee and Date

\_\_\_\_\_  
Signature of Supervisor and Date

**\*\*A copy of this document must accompany any ID badge, key and/or access card request.  
Residents and interns will follow CVM VMTH guidelines.**