



Tool Sign-Off Form

Note: All clean room users are required to have prior training on a tool. They must demonstrate proficiency using the tool with the instructor present. This must be done before they will be given access rights on the tool. Depending on the complexity of the tool, the student might need to go through the instructional process a few times. Please e-mail the instructor; he will then schedule a training session for the new tool user. This sheet will remain in your possession until all signatures have been issued. **(Print this form on clean room paper)**

Name of Applicant _____

E-mail Address _____

Phone Number _____

Advisor _____

Type of Class _____

Date of Initial Training _____

1) **Instructor Signature** _____ **(Must be signed after initial instruction)**

Desired tool for access rights: _____

Is this your first individual training class? _____

If not, how many other times have you been observed using the tool? _____

Instructor Approval Yes

2) **Instructor Signature** _____ Date _____

Reason for student not being approved _____

I will use the tool according to the standard operating procedure and will follow the safety protocols.

Student Signature _____