

The University of Texas at Tyler
LABORATORY EXPERIMENT HAZARD ASSESSMENT FORM

Requester Name:	Event Date:
	Start/End Times:
Building/Room Location:	
Brief description of the experiment/demonstration:	
Hazard Assessment: <i>(check <u>all</u> that apply)</i>	<input type="checkbox"/> Experiment/Demonstration is necessary to UT Tyler curriculum <input type="checkbox"/> Substitution of less hazardous material impractical <input type="checkbox"/> The minimum hazardous material(s) will be used <input type="checkbox"/> The safest procedures will be implemented <input type="checkbox"/> Actions will be taken to minimize/neutralize hazardous waste
Type of Reactive: <i>(check one)</i>	<input type="checkbox"/> Explosive <input type="checkbox"/> Organic Peroxide <input type="checkbox"/> Water-Reactive <input type="checkbox"/> Pyrophoric
Event Procedures: <i>(check <u>all</u> that apply)</i>	<input type="checkbox"/> Follow SDS Handling & Storage procedures <input type="checkbox"/> Utilize Engineering Controls <input type="checkbox"/> Utilize Administrative Controls <input type="checkbox"/> Utilize Protective Barrier/Safety Shield <input type="checkbox"/> Utilize PPE
Participant Safety:	<input type="checkbox"/> Cordon/Safe standoff distance <input type="checkbox"/> Sited upwind of hazard <input type="checkbox"/> PPE provided
Safety Checklist: <i>(check <u>all</u> that apply)</i>	<input type="checkbox"/> Emergency Action Plan (readily available) <input type="checkbox"/> Emergency Notifications (cell phone readily available) <input type="checkbox"/> Fire Extinguisher (readily available) <input type="checkbox"/> Spill/Containment Materials (readily available)
Fire Alarm System Impact:	<input type="checkbox"/> Heat Detector <input type="checkbox"/> Smoke Detector <input type="checkbox"/> N/A – Heat/Smoke will not be generated
Notifications: <i>(Prior to / upon completion)</i>	<input type="checkbox"/> Building/Area Occupants <input type="checkbox"/> Environmental Health & Safety (903)-566-7011 <input type="checkbox"/> University Police Department (903)-566-7300
Requester Signature:	Date:
Department Chair Signature:	Date:
Director of EH&S Signature:	Date: