

Access form

Please provide the following information:

First Name:

Last Name:

Employee/Student #:

uOttawa Email:

Emergency Contact:

Contact #:

Department:

Supervisor:

Room #:

Extension:

Start date:

End date:

Are you a new student / staff with uOttawa?:

Status (Select the most appropriate one):

Request for (Select the most appropriate):

Mandatory training for all paid personnel, students (honours and co-op) and volunteers:

[WHMIS Office](#) or [WHMIS Laboratory](#)

[Worker Health and Safety Awareness](#)

[Respect In the Workplace](#)

[Violence Prevention](#)

[Accessibility Standards for Customer Service](#)

[Working Together: The Code and the AODA](#)

[Digital Self-Defence](#)

[Mode 1: What to do if someone discloses an alleged incident of sexual violence](#)

Mandatory training for all supervisors:

[Supervisor Health and Safety Awareness](#)

Mandatory for all wet laboratory personnel:

[Laboratory Safety](#)

[Autoclave Safety](#)

Job-specific training:

[Principles of Biosafety](#)

[Radiation Safety](#)

[Principles of Laser Safety](#)

Faculté de médecine

Faculty of Medicine

Bureau de la gestion du risque et de la santé-sécurité
Health, Safety and Risk Management

medsafety@uottawa.ca

4/25/2024

Supervisors:

You must ensure that your delegates are competent to work safely without supervision when you request "all hours" access. New personnel and undergraduate students are recommended to have restricted access until they gain the required skills and experience. Access can be extended at a later date, as required.

Access requests:

New access cards will be initially programmed with a one month expiry from the date of issue. This allows time for users to complete all their mandatory training, and to provide the relevant training documentation (certificates) to the departmental offices, on page 3. Once the mandatory training documentation is provided, then the one month expiry date will be removed.

Please indicate which room(s)/lab(s) and/or areas you require access to:

Hours requested: Business hours (Mon-Fri, 7am-6pm. Excludes holidays)

 All hours (24hr. Includes weekend and holidays)

If you require access to the Animal Care & Veterinary Services (ACVS), please see Jennifer Andrusiak in RGN 1311. You will need to bring your access card with you. Please note: Access cards with ACVS access expire every year, therefore, you will need to renew your access card on a yearly basis.

Authorization by Flow Cytometry Core Facility Staff:

Access to 4206 4206A

Hours: All hours Business (Mon-Fri)

Signature of Flow Cytometry Core Facility Manager Date

Authorization by CBIA Core Staff:

Access to 3140

Hours: All hours Business (Mon-Fri)

Signature of CBIA Core Facility Manager Date

Card/keys Regulations

- You are personally responsible for your access card/keys.
- Cards used in unauthorized areas or outside of authorized time periods will trigger an alarm. This alarm and the card number will be recorded by the security server.
- An access controlled door held open for more than 120 seconds will trigger an alarm.
- If you lose your card/keys or have it stolen, you must report it to your department's card administrator or Protection Services immediately.
- Never lend your access card or keys, or allow unauthorized persons to enter an area for which they don't have a card or keys. Ask them to contact Protection Services, lending your access card/keys to another person will result in the withdrawal of all access privileges.
- Unauthorized persons found in access control areas should be reported to Protection Services.
- **At the end of your time at the University of Ottawa, keys and cards must be returned to your administrative office.**

Signatures and confirmation

I, (your name) [redacted] have read and confirm that I understand the rules and instructions governing the University of Ottawa access card system. I recognize that both Protection Services and my service or academic unit manager reserve the right to cancel my card if I fail to follow the rules and instructions.

[redacted]

Student/Employee Signature

[redacted]

Date

[redacted]

Supervisor's Signature*

[redacted]

Date

**Note: Supervisor's signature is not required if Core Facility access is being requested.*

What to do with this form

Please fill out this form electronically, after printing the form and attaching any relevant training documentation, the form can be handed to the following locations:

For personnel in Biochemistry, Microbiology and Immunology (BMI) and Cellular and Molecular Medicine (CMM) RGN 3206A

For personnel in School of Epidemiology and Public Health (SEPH): 600PM 101G

For personnel in Kidney Research (KRC): RGN2527

For personnel in Neuroscience (NRI): RGN 1411

For personnel in Pathology: RGN 4155

For personnel wanting access to Flow Cytometry Facility: RGN 4166

For personnel wanting access to CBIA Core: RGN 3171

For personnel in administrative departments or others not listed above: RGN 1106