



# FORM FOR AUTHORIZATION OF ACCESS TO BUILDINGS DURING SPECIAL HOURS (HOLIDAYS, NIGHTTIME)

For applications from persons coming from foreign institutions, this form should be accompanied by a copy of the AIRei registration, in accordance with the instructions available at:



# **APPLICANT INFORMATION<sup>1</sup>**

NAME:

SURNAMES:

ID document or Passport:

CONTACT MOBILE PHONE:

EMAIL:

TYPE OF RELATIONSHIP

COMES FROM A FOREIGN INSTITUTION (YES NO):

# DETAILS OF THE RESPONSIBLE PERSON<sup>2</sup>

NAME:

SURNAMES:

DEPARTMENT/AREA:

CONTACT MOBILE PHONE:

<sup>&</sup>lt;sup>1</sup>The applicant is aware of the laboratory safety standards, published at the web address:

 $<sup>\</sup>underline{http://www.uclm.es/cr/fquimicas/temas\_interes/programa\_incendio/Documentacion/guia\_seguridad\_laboratorio.pdf$ 

<sup>&</sup>lt;sup>2</sup> The person responsible for the applicant must be permanent personnel of the UCLM linked to the Faculty of Chemical Sciences and Technologies (Main researcher of the project; professor that has made the invitation; Area Coordinator; Director; Department or Head of Laboratory/Research Group, etc.)





The applicant is hereby authorized for the following experimental works in isolation or alone outside of normal hours in the spaces and times detailed below.

## **BUILDING/SA TO WHICH ACCESS IS REQUESTED**

BUILDING	REQUESTED SPACES
SAINT ALBERTO MAGNO	·
MARIE CURIE	
FRANCISCO FERNANDEZ IPARRAGUIRRE	
ENRIQUE COSTA	
Access to Research Institutes. In this case, in additio	
signature of the address of the Institute to which ad	
BUILDING irica	REQUESTED SPACES
ITQUIMA	
ICCA	
ICCCA INTERNET INTERN	Access to this building must be requested by another procedure. Contact your managers.





#### AUTHORIZED WORKPLACES

Laboratory/workshop Identification and location	Responsible for the laboratory and contact details in case of emergency (indicate if necessary)

For this, the worker has been trained in the management of work equipment, chemical and biological agents and necessary procedures, as well as the safety regulations to be applied in their use (risks and preventive measures of protection and prevention to be adopted, conditions of use, work procedure, prohibition of annulment of safety devices, individual protection equipment to be used, etc.).

# PERIOD OF VALIDITY: START

END

## **AUTHORIZED SCHEDULE:**

## **OBSERVATIONS:**

## Send to the Dean's secretary for processing by signature tray in sequence:

- Applicant
- *Responsible for the applicant*
- Person in charge of the laboratory/s in which the work will be carried out in the event that this does not coincide with the person in charge of the applicant
- Dean / IRICA Director / ITQUIMA Director





The applicant will manually sign a document confirming the delivery of the access card, together with the document accepting the Center's security protocol.

The access cards will be activated in the Administration of the Faculty of Chemical Sciences and Technologies (*San Alberto Magno* Building)

The Dean's office or the address of the corresponding institute will send a copy of the authorization for your information to:

*Campus vice-management (access authorizations for card locks) (by sending this document via email)* 

Security company (by sending this document via email).

Prevention service (by sending this document via email).