

BCCHR CORE FACILITIES ONBOARDING FORM

USER ACKNOWLEDGEMENT & AGREEMENT:

Mandatory orientations and training:

- Complete the mandatory [training](#) for all UBC workers
- Complete necessary [Lab specific training](#), including spill cart location, eye wash station, and emergency showers
- Hold valid UBC Chemical Safety and Biosafety Training Certificates.
- Review the [UBC Health and Safety Policy](#) and my own lab's [Work Alone Policy](#)
- Be aware of the [UBC Accident/Incident Reporting](#) System ([CAIRS form](#))

General laboratory practices:

- No food or drink is allowed in the laboratory
- Minimum PPE must be worn at all times in the laboratory: lab coat, long/loose-fitting pants, and closed-toe shoes. Additional PPE (e.g., gloves, eye protection) must be used as required by specific procedures
- Maintain a clean workspace. Clean as you go, disinfect shared surfaces after use, and promptly report any equipment malfunctions or contamination concerns to staff. Dispose sharps, chemicals, and biohazard wastes as per general lab safety and [BCCHR Waste Management Procedures](#)
- In case of emergency, call **899 (C&W First Aid)** and **2999 (C&W Security)** from any internal phone

User conduct and access:

- Core equipment may only be used after proper training and approval from Core Staff
- Access is restricted to authorized personnel only
- Any unsafe behavior or unauthorized access will result in suspension of user privileges

PRINCIPAL INVESTIGATOR AUTHORIZATION & AGREEMENT:

The following equipment is currently available for self-serve use. **By signing this form, you grant this lab member permission to receive training conducted by core staff or core-approved personnel, and operate independently on all instruments listed below, as well as any new instruments that may be added to the core.**

BCCHR FLOW CYTOMETRY CORE (A4-143):

- | | |
|---|---|
| <ul style="list-style-type: none"> • BD SYMPHONY A5 • BD FORTRESSA X-20 • CYTOFLEX | <ul style="list-style-type: none"> • BD SYMPHONY A1 • CYTEK AURORA • OTHER:..... |
|---|---|

BCCHR IMAGING CORE (A4-110):

- | | |
|---|--|
| <ul style="list-style-type: none"> • LEICA SP5 CONFOCAL • LEICA SP8 CONFOCAL • OLYMPUS BX61 • IMAGEEXPRESS IXMC HC IMAGER | <ul style="list-style-type: none"> • KEYENCE X810 • AKOYA PHENOCYCLER 2.0 (A4-112) • IMAGE ANALYSIS STATIONS • OTHER:..... |
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BCCHR HISTOLOGY CORE (A4-132):

- | | |
|--|---|
| <ul style="list-style-type: none"> • MICROTOME • PARAFFIN EMBEDDER | <ul style="list-style-type: none"> • Cryostat (Variety 271, North Block 2034) • OTHER:..... |
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ONBOARDING FORM CORE FACILITIES

BCCHR ACMaN CORE (Variety Rm 171):

- FREEZE-DRYER
- MULTI-VAP (N2 EVAPORATOR)
- SAVANT SPEEDVAC
- PRO 250 HOMOGENIZER
- BIOTEK PLATE READER
- VARIOSKAN LUX (A5-126)
- SEAHORSE (A4-124)
- OTHER:.....

Exceptions (if any)

If you wish to exclude any specific instruments from this approval, please list them here:

ACKNOWLEDGMENT OF RESPONSIBILITY AND LIABILITY WAIVER

The **User** acknowledges that they have completed all required safety orientations and training relevant to their work in BCCHR Core Facilities. User understand and agree to comply with all applicable policies, standard operating procedures, and safety requirements.

The **User** acknowledges that failure to follow these requirements may result in suspension of access privileges and/or disciplinary action as per UBC / Core Facilities policy.

The **User** understands that BCCHR Core Facilities and its staff are not liable for injury, loss, or damage arising from their failure to adhere to training, safety procedures, or proper use of equipment.

The **Principal Investigator (PI)** confirms that the above individual is a member of their research group and has their authorization to receive training and use Core Facilities equipment. The PI understand that their lab retains responsibility for ensuring the user's ongoing compliance with safety and operational policies.

Name of User:

Role in lab:

Signature of User:

Name of Lab PI:

Signature of Lab PI*:

Date:

**If multiple supervisors, obtain signatures from each prior to training. Each approving PI is responsible for ensuring compliance of their respective lab members. E-Signatures are acceptable. Lab Manager signature unacceptable*