**State Key Laboratory of Marine Pollution**

**Standing Circular**

**Policy of Visitors Performing Experimental Work in SKLMP Laboratories**

Date issued: October 17, 2017

State Key Laboratory of Marine Pollution (SKLMP) is committed to protecting all laboratory users. This policy is written to protect all visitors (e.g. collaborated workers, invited guests, volunteers and etc.) and minimize the risk to the visitors.

The following rules should be strictly followed when a SKLMP staff invites visitors performing experimental work in SKLMP laboratories:-

* The host staff should seek approval from the Director for the visitors **at least one week before** the commencement of any experimental work by completing the application form as attached.
* The visitors should follow all the safety regulations of SKLMP and the University including:-
* Upon receipt of approval by the Director for performing experimental work in SKLMP laboratories, visitors **MUST** attend the departmental safety training as scheduled before the commencement of any experimental work
* Visitors **MUST** put on an identification badge and use a smart card for access all the times in SKLMP laboratory areas

- The host staff should:-

* ensure that the visitors follow the safety requirements of SKLMP
* ensure that the visitors have a valid insurance coverage for their experimental work in SKLMP laboratories
* supervise the experimental work of visitors
* be responsible for the behaviors of visitors during their stay in SKLMP laboratories
* be responsible for repairs of replacement for any damaged equipment and facilities

Violation of the above rules will result in disciplinary action from SKLMP including:-

* Warning to host staff and visitors
* Restricting visitors access to laboratories

Prof. Kenny M.Y. Leung

Director

State Key Laboratory of Marine Pollution

**City University of Hong Kong**

**State Key Laboratory in Marine Pollution**

**Application for Visitors Performing Experimental Work in SKLMP Laboratories**

**Information of Host Staff**

Name: Position:

Contract Number: Email:

**Information of Visitor**

Name: Position:

Contact Number: Email:

**Information of Using SKLMP Laboratories**

Date: Time: from to

Location:

Purpose/Reason:

**Declaration by Visitor**

1. I agree and undertake to abide by the Policy of Visitors Performing Experimental Work in SKLMP laboratories.
2. I take full responsibility for any injury, loss or damage to my person and / or equipment and facilities that may arise from the experimental work in SKLMP laboratories.
3. I confirm that I have a valid insurance for the coverage and at the amount in each case specified by City University of Hong Kong (“University”) and I shall, upon request of the University, produce a copy of such insurance policy to the University.

**Signature of Visitor Date**

**Signature of Host Staff Date**

**Approval**

This application is approved / not approved

**Signature of Director Date**

**Departmental Safety Training**

Scheduled Date: Time:

Completed and verified by: Date: