**Laboratory Registration Personnel Update Form**

Instructions Please submit completed forms via email to UCCS EH&S Department through cnorton@uccs.edu. If you need assistance in completing this form, please contact Cynthia Norton (x3212).

Date:

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| **General Information**  |
| Building |  | Room No. |   | Department |  |
| Room Description |  |
| **Principal Investigator** |
| Emergency Contact | Title | e-mail | Campus Phone | Emergency Phone | cy Phone |
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| **Emergency Contact Information** |
| Emergency Contact | Title | e-mail | Campus Phone | Emergency Phone |
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| **Registration of Laboratory Employees****(List all employees, undergraduate students, graduate students, fellow researchers)** |
| **First Name** | **Last Name** | **e-Mail** | **EHS Use Only** |
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