

Appendix C: Laser User Registration & Training Form

All Class 3B and 4 laser users are required to be declared with the WKU Laser Safety Officer. Complete this form and forward to: Laser Safety Officer, Environmental Health & Safety, Fax: 270-745-5037

Name _____ Phone _____
 Department _____ Building _____
 Laser Supervisor _____ Room Number _____

List all laser or laser safety training course work completed. Note all the dates completed, duration (hours of course) and brief description. Affix training materials to the record. See [Appendix G](#) for list of training topics.

Date Completed	Duration of Training	Description of Training

Laser User Signature _____ Date _____

Laser Supervisor Signature _____ Date _____