UC RIVERSIDE UNIVERSITY OF CALIFORNIA
Bourns College of Engineering

Materials Science & Engineering Program
Tel 951.827.3392
Fax 951.827.3419
www.mse.ucr.edu

Materials Science and Engineering

TGA & DSC Equipment Authorization and Training Certification

☐ New Authorization ☐ COA Change ☐ TGA only ☐ DSC only ☐ TGA + DSC training

PI Department: _____ Date: _____

I, (Printed Name of PI or Advisor) _____, authorize:

Employee/Student (Printed Name of User): _____

Employee/Student's Department: _____

☐ Graduate Student ☐ Undergraduate ☐ Post-Doc ☐ Other: _____

Employee/Student E-mail: _____ Phone: _____

Expected Graduation or Departure Date of Employee/Student: _____

NetID: _____ ENGR Username: _____

☐ I acknowledge access to TGA & DSC equipment requires membership to Fixed Fee-For-Service Facility

☐ To obtain training and authorize scheduling time on the TGA and DSC equipment in MSE

☐ I certify that the employee listed on this form has received the following training:

- Laboratory Safety Fundamentals
- Hazardous Waste Management
- Compressed Gas Safety

☐ I certify that I and the employee have read and understand the MSE FFS Policies and Regulations

I, the PI, certify that I will be responsible for any damages to the TGA and/or DSC if my employee is found to be at fault (but not limited to) for the following:

☐ Damage to thermocouple by spilling or depositing sample onto sensors

☐ Damage to chamber cells by coating surface with sample vapor or residue

☐ Unauthorized tampering with gases such as regulator adjustment or plumping

☐ Failure to flow protective and purge gases to protect chamber cells during experiments

☐ Use of incompatible crucibles or pans on the Auto Sampler Changer (ASC)

☐ Unsafe or inappropriate temperature programs

☐ Unauthorized attempt to fix or modify the instrument

☐ Unauthorized usage or tampering with cryogenic fluids and their storage tanks

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☐ CHECK HERE IF COA ACCOUNT CHARGED IS THE **SAME** FOR TGA AND DSC

☐ CHECK HERE IF COA ACCOUNT CHARGED IS **DIFFERENT** FOR TGA AND DSC

COA for use of Facility and Training Charges for the **TGA ONLY (or both TGA and DSC option):**

Entity: _____ Fund: _____ Activity: _____ Function: _____

Program: _____ Project: _____ Flex 1: _____ Flex 2: _____

_____ _____

Signature of PI (or Advisor)

Signature of PI's Dept. Financial Analyst or Financial Administrative Officer

COA for use of Facility and Training Charges for the **DSC ONLY:**

Entity: _____ Fund: _____ Activity: _____ Function: _____

Program: _____ Project: _____ Flex 1: _____ Flex 2: _____

_____ _____

Signature of PI (or Advisor)

Signature of PI's Dept. Financial Analyst or Financial Administrative Officer

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NOTES (FOR ADMIN USE ONLY):