



Application for the release of the laboratories attendance clearance for foreign students

Dipartimento di Medicina Veterinaria e Produzioni Animali (DMVPA) - UNINA	PROTEZIONE E PREVENZIONE DEI LAVORATORI EQUIPARATI	Data_08/01/2020
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APPLICATION N. _____ [Number shown on the Unique Departmental Registry for the student laboratories attendance clearance release]

1. Identification Data

LABORATORY: _____ [Lab name]

STUDENT NAME AND SURNAME: _____

BORN IN _____ on _____

ROLE: _____

STUDENT SERVICE NUMBER: _____

ACADEMIC YEAR: _____

2. Prevention and protection report

The undersigned _____ [name surname RADRL], as
Research Supervisor of the Laboratory of

_____, certifies that the information and the training, pursuant to art. 36 and 37 of Legislative Decree 81/08 and as amended, of the equivalent generalized worker (student, PhD student) took place on the days indicated below under the supervision of the Laboratory Research Manager (RADRL).

N.	Date	Schedule	Signature of worker (in full and legible)	Signature of RADRL (in full and legible)
	/ /	From to		
	/ /	From to		



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	/ /	From	to		
	/ /	From	to		
	/ /	From	to		

The following information and instructions reported above were given to the equivalent worker during the theoretical-practical training:

1. Evacuation procedures;
2. Behavioral rules in case of fire or earthquake;
3. Name of the RSPP;
4. Names of firefighting and first aid workers;
5. Safety signs and pictograms of the labels;
6. Handling of loads;
7. Risks _____ [insert the types of risk];
8. Location of the safety data sheets for their consultation;
9. Use of PPE (methods and their location within the laboratories);
10. PPE needed for laboratory activities;
11. Risks related to the machines and equipment in the laboratory and practical training for their safe use;
12. Location of the use and maintenance manuals of the machines and equipment for consultation;
13. Transversal risks (tripping, bumps, cuts and falls);
14. Dangers present in the laboratory;
15. Prevention rules to be respected in the laboratory.

3. Health surveillance (if applicable)

The equiparated worker has undergone health surveillance on _____ [insert HS date]

Nome file

Pagina



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The Competend Doctor issued the Health Certificate on _____ [insert certificate date]

Attach to the present form the original Certificate (if any)

4. Training

The _____ equiparated _____ worker _____ was _____ formed by _____ the certificate was issued on _____ [insert certificate date]

Attach to the present form the original Certificate (if any)

5. Delivery of Personal Protective Equipment (PPE - DPI in Italian)

The following Personal Protective Devices were delivered and made available to the equivalent worker during the period of Laboratory attendance:

Type of PPE	Bar those delivered or made available
Safety shoes - non-slip type - foot protection	<input type="checkbox"/>
Protective gloves.	<input type="checkbox"/>
Protection mask.	<input type="checkbox"/>
Safety goggles:	<input type="checkbox"/>
Others:	

NAPLES, _____

THE RADRL

The equivalent worker



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DECLARATION OF THE EQUIVALENT WORKER ON THE INFORMATION/TRAINING RECEIVED AND PPE DELIVERY FOR PROTECTION AND PREVENTION PURPOSE DURING THE ATTENDANCE OF THE LABORATORIES

The undersigned _____ born on
_____ in _____ and resident in

_____ aware that anyone who makes false
statements is punished pursuant to the Italian penal code and special laws on the subject, art. 76 D.P.R. n.
445/2000,

DECLARES

- to have received the aforementioned information and training in the days indicated;
- to have adequately understood the information and the training received which are clear and understandable to me;
- to have been trained on the correct use of the equipment and machines present and PPE;
- to have received the above-mentioned PPE;
- to give his/her consent to the processing of personal data pursuant to EC Reg. 679/2016;
- to have understood the safety labels and escape routes indicated in Italian.

Naples, _____

Signature of the equivalent worker
(in full and legible)

I enclose a copy of an identification document

This document, completed in its entirety, must be delivered to the Departmental Safety and Training Commission Manager for the release of the clearance which will allow the equivalent worker to access the laboratories (all the documents will be preserved by RADRL or by the Departmental Erasmus Commission for Erasmus student)