

Shops/Services Authorization Request Form

TAMU Department of Chemistry

1. EMPLOYEE COMPLETES SECTION 1

Name (PRINT): _____

The individual authorized to use PI funding is a:

Faculty Staff Graduate Student Incoming Graduate Student Visiting Scholar

UIN [Required]: _____ Department: _____

Phone Number [Required]: _____ TAMU Email [Required]: _____

Lab/Office Room #: _____ Today's Date: _____

Replacement/Change: Yes No Account Change (No Card will be issued): Yes No

2. PI COMPLETES SECTION 2

ACCOUNT [Required] # _____

PI Name [Required]: _____ X _____ Date: _____

3. EMPLOYEE OBTAINS APPROVAL FROM FINANCE OFFICE [CHEM 119]

Finance Staff Approval:

Name: _____ X _____ Date: _____

4. EMPLOYEE RETURNS COMPLETED FORM TO LAB SAFETY & OPERATIONS MANGER (CHEM 118)

Stockroom Cards will not be issued if required Hazard Communication, Lab Safety and Work Area Specific Safety Trainings have not been completed. Ensure your training documentation is submitted when requesting a card.

Safety Manager Name [Required]: _____

Safety Manager Signature (Required): _____ Date: _____