

THE UNIVERSITY OF TEXAS DEPARTMENT OF PHYSICS  
STUDENT MACHINE SHOP AGREEMENT

I have read, understand and agree to follow all the rules set forth in the Physics Student Machine Shop Safety Manual.

I have read, understand and agree to follow all the rules set forth by the Physics Student Machine Shop for after hours and weekends.

I understand that the machine shop and all its equipment are permitted to be used only when a shop supervisor (any Physics Instrument Maker) is present or any three student members are present.

I understand that the Physics Department's appointed shop supervisors are in charge of the shop. I will respect their authority at all times. If I have a grievance with a supervisor's judgment I will take the matter to their immediate superior, the E/MT Supervisor.

I understand that violating any of the preceding rules is cause for suspension or removal of my shop privileges.

Student's Name: \_\_\_\_\_

Lab Location: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Office Ph. No.: \_\_\_\_\_ Lab(s) Ph. No(s): \_\_\_\_\_

Home Ph. No.: \_\_\_\_\_

Emergency Contact:

Name (print or type): \_\_\_\_\_

Relationship: \_\_\_\_\_ Ph. No.: \_\_\_\_\_

Professor's Name (print or type): \_\_\_\_\_

Professor's Office Ph. No.: \_\_\_\_\_

Professor's Home Ph. No.: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Professor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_