WELCOME to the Faculty of Chemical Sciences and Technologies of Ciudad Real, teaching and research center of the University of Castilla La Mancha.

From the Dean's Office of the Faculty we promote the safety and health of all our workers, students, scholarship holders, visiting staff and any other person who for different reasons and / or circumstances have to access any of our facilities, for which:

Name and Surname: ....., with NIF/NIE:

..... I DECLARE: (indicate as appropriate)

That I have adequate and specific training and information on risks and preventive measures.

to take into account in the facilities/center/laboratory/research line where I will develop my work/internship, so I undertake to strictly comply with them, so as not to jeopardize the safety and health of other users, nor my own, communicating any incident that could affect such safety and health, by the means internally established (Incident Report).

That I do NOT have adequate and specific training and information on risks and measures.

I am committed to follow at all times the indications of those responsible for the facilities/center/laboratory/research line where I will develop my work/internship, in order not to put at risk the safety and health of other users, nor my own.

That I have adequate and specific training and information on the Self-Protection Plan of the building(s):

.....

....., for which I undertake to act according to said Self-Protection Plan in case of activation of the same.

And that in those buildings belonging to the Faculty of Chemical Sciences and Technologies of Ciudad Real, and the Multipurpose Hall that I do NOT have adequate and specific training and information on the Self-Protection Plan of the same, I agree NOT TO STAY ALONE in any restricted access room of the different buildings, unless expressly authorized by a person responsible for the center/building/laboratory, or accompanied by someone who does have adequate and specific training and information on the Self-Protection Plan of the building or center to which I have to access. In the latter two cases, whoever authorizes me, or my companion, will be responsible for my health and safety in case of activation of the Self-Protection Plan of the center/building/laboratory where I am.

In Ciudad Real, at ..... from 202

Sender:

The possible lack of truthfulness in the information provided in this document shall be the total and absolute responsibility of the signatory, with the corresponding liability that their actions in the aforementioned facilities may entail.