

SAFETY INFORMATION FOR TEMPORARY ACCESS

FORM_0

May 2022

LA I / A:	ABORATORY / AREA :						
in	authorized by prof. / eng, n quality of (Dean of the Industrial Engineering Department / Responsible of the Laboratory / Responsible of the reaching/research activity)						
	attend / visit the above laboratory / spaces,						
DECLARES / DECLARE							
_	I've been informed on emergency and evacuation procedures, the alarm signal and the composition of the emergency team;						

AND GUARANTEES / GUARANTEE

I've been informed on the risks related to the Laboratory activities and to the work environment;

- to report to my responsible or to the Laboratory staff any emergency conditions;
- to observe, in case of emergency, Laboratory personnel instructions, in order to reach external meeting points;
- to follow received instructions and not to take any action without authorization;
- not to take any action which could compromise the safety of my person, of other people and of the building;
- to inform my responsible or the Laboratory staff in case of any unusual condition.

Bologna / Forlì,	
Activity Responsible (RDRL)	Guest / Student / Visitor
Name: prof. / eng	Name:
Signature	Signature

(1) External company technician, student, guest, ecc.

HEALTH AND SAFETY MANAGEMENT ORGANIZATION CHART of the INDUSTRIAL ENGINEERING DEPARTMENT

Position	NAME	CONTACTS
Dean of the University of Bologna	Prof. Giovanni Molari	
Dean of the Industrial Engineering Department	Prof. Alfredo Liverani	051 / 2093452
Chief of the Health and Safety Office	Dr. (Ph.D.) Rossella Serra	051 / 2091420
University of Bologna – Health and Safety Office	Dr. (Ph.D.) Flavia Ferroni	051 / 2091419
	Dr. (Ph.D.) Simona Rossi	051 / 2091422
	Dr. (Ph.D.) Alessandra Savarese	051 / 2091432
	Eng. Annalisa Vignali	051 / 2091469
Medical supervisor	Dr. (M.D.) Cristiana Fiorentini	051 / 4290217
On site safety reference person	Bologna Campus: Eng. Federico Boselli	051 / 2090473
	Forlì Campus: Eng. Veronica Rossi	0543 / 374406



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Student list:

BADGE NR.	SURNAME	NAME	SIGNATURE
	I .	II.	I.