

Reverse Osmosis Authorization Form
 Chemical Engineering, McGill University
 Room 1150, M. H. Wong Building

This form must be complete and clear (**print**).
 Please note that there is a \$0.35 per litre charge (\$0.50 for non-ChemEng).

Name	McGill Email	ID #	Dept	Fund

Supervisor's signature: _____ Date: _____
 (mm-dd-yy)

When the form is completed, kindly return it to mailbox "Reverse Osmosis Forms" on 3A. You will be contacted via email with further details regarding required training.

TO BE COMPLETED AFTER TRAINING

I have received the proper training and agree to abide by the rules and regulations regarding proper operating procedures. I understand that my access may be revoked due to any misuse/abuse of the system or inappropriate behavior.

Applicant's signature: _____ Date: _____ Status: _____ End date: _____

Applicant's signature: _____ Date: _____ Status: _____ End date: _____

Applicant's signature: _____ Date: _____ Status: _____ End date: _____

Applicant's signature: _____ Date: _____ Status: _____ End date: _____

Applicant's signature: _____ Date: _____ Status: _____ End date: _____

Trainer's signature: _____ Date: _____

Note: Status (VR, UG, M Eng, PhD, Staff)