**Name:**

**Research Group: Supervisor/Manager:**

**Room location(s) & number**

|  |  |
| --- | --- |
| **Action** | **Completed** |
| Consumables | Chemicals and biological agents identified for disposal, separated, and reported to lab manager. |  |
| Remaining chemicals and biological agents properly labelled and list compiled outlining name, date of expiry and storage location.  |  |
| Person identified to assume responsibility of all outstanding chemicals, biological agents, and general consumables (please state name). |  |
| Equipment | All equipment used has been cleaned/decontaminated. |  |
| Equipment inventory ID, PAT status and working status has been recorded and relayed to lab manager. |  |
| Equipment SOP’s and User Manuals have been passed to the lab manager. |  |
| Any borrowed equipment has been returned to the rightful owner. |  |
| Samples | All fridges, freezers and ambient storage areas have been cleared of expired samples and samples disposed of. |  |
| Any remaining samples have been clearly labelled and a person has been identified to assume responsibility of them. |  |
| Other/General | Office and/or write up areas have been completely cleared of all paperwork and responsibly recycled or disposed of. Area is clean and ready for new occupant. |  |
| IT equipment has been returned to supervisor. If otherwise, approval has been given by Head of School. |  |
| All project data has been shared with the project manager (where appropriate). |  |
| All personal data has been removed from IT equipment. |  |

**Forwarding Information**

Address: Phone: Email:

|  |  |
| --- | --- |
| Manager |  |
| Leaver |  |

**Declaration**

The completed checklist has been reviewed and matters have been satisfactorily addressed