

### Intern Training Checklist

Intern Name: \_\_\_\_\_ Trainer Name: \_\_\_\_\_

Topic	Date	Trainee Initials	Trainer Initials
Laboratory Ethics Policy			
State Ethics Policy			
Confidentiality			
Laboratory Safety (Building Evacuation, use of PPE – if applicable, General building orientation)			

As an intern for the State of Connecticut DESPP, Division of Scientific Services I understand my obligation to follow the laboratory and state ethics guidelines. I understand that not doing so may lead to immediate removal from the laboratory and under some circumstances may lead to legal action.

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Trainer: \_\_\_\_\_ Date: \_\_\_\_\_