



# Beamline Orientation

### APS User Administration

- o Complete the APS User Orientation APS 101, ANL Facility Orientation ESH 100, General Employee Radiation Training (GERT) ESH 738, Cyber Security ESH 223, and Electrical Safety Training ESH 377.
- o Obtain APS user badge for access to ANL gate, APS building, and SBC office & laboratory

### SBC User Administration

- o Obtain dosimeter (optional; not required by APS)
- o Complete online SBC Sector 19 User Registration

### Emergency and Facility Safety

- o Learn Emergency Medical and Security Phone Number: 911 from on site phones or 630-252-1911 from cell phones
- o Learn how to call APS Floor Coordinator: Pager 2-0101 (*Dial 2-0101, listen to message, enter sector 19 telephone number 19ID(2-9823) or 19BM( 2-9833), press # key, hang up, and wait for coordinator to call.*)
- o Learn Fire Alarm Notification: Continuous ringing means EVACUATE IMMEDIATELY
- o Learn Tornado Alert: Notification via loud speaker tone followed by action message (*Tornado shelters are located in machine shop and restrooms in LOMs.*)
- o Locate nearest Fire Extinguishers
- o Locate nearby Emergency Exits
- o Read Emergency Information on yellow Safety Information board
- o Locate telephones and list of emergency phone numbers for SBC personnel
- o No shorts, skirts, or open toed shoes may be worn at the SBC facility

### Beamline Safety and Operations

- o Read "Tour Guide to the SBC Facilities at APS" and/or complete the tour.
- o Complete the Experiment End Station Orientation
- o Complete the Personnel Safety System (PSS) Training
- o Complete the Biochemistry Laboratory Orientation (Training Checklist 2)
- o Call Floor Coordinator and request posting of "APS Experiment Safety Approval Form"
- o Sign three copies of "APS Experiment Safety Approval Form", ask SBC staff host to sign same, and post signed form on yellow Safety Information board
- o Fill-in & sign this checklist; post this checklist on yellow Safety Information board

***I understand the safety and operational procedures outlined above and agree to operate the beamline and conduct my experiment in a safe manner. I understand that my beam time starts at 10 AM on To 8 AM on .***

**Institutional Affiliation:** \_\_\_\_\_ **SBC Exp. Track No:** \_\_\_\_\_

User's Name	Badge #	Signature	Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*Training valid for this experimental run only.*

SBC Staff Instructor \_\_\_\_\_