

## Graduate Student Check Out Form

**Department of Chemistry**



**Michigan State University**

(Please note: Final Certification of your degree will not be processed until the Graduate Office receives this completed Check Out Form.)

1. **Name:** \_\_\_\_\_ **Advisor:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Original copies of laboratory notebooks and backup copies of computer files related to research, have been turned in. Supplies and equipment have been checked in. Working space and apparatus is in satisfactory condition, all products are properly labeled, hazardous wastes have been removed, and desk is clean and in satisfactory condition. Keys for desk/file cabinets/etc. have been returned to Professor.

**Signature** \_\_\_\_\_ **(Advisor)**

2. Check Chemistry mailbox, and provide Main Office with a forwarding address.

**Signature** \_\_\_\_\_ **(Main Office Staff, Room 485)**

3. Chemistry Computer Accounts attended to.

**Signature** \_\_\_\_\_ **(IT Support, Room 383)**

4. X-ray Ring/Badge has been returned to Environmental Health & Safety (if applicable).

**Signature** \_\_\_\_\_ **(Call EHS at 517-355-0153 to complete task )**

5. All chemical containers have been properly labeled and stored. All hazardous waste has been picked up by EHS. Theory and Physical students must still have EHS sign off.

**Signature** \_\_\_\_\_ **(Call EHS at 517-355-0153 to complete task)**

6. All keys have been turned in and/or accounted for, and MSU ID Card access has been removed.

**Signature** \_\_\_\_\_ **(Bethanny Potter, Room 320)**

7. Chemistry Directory entry attended to.

**Signature** \_\_\_\_\_ **(Anna Osborn, Room 320)**

8. **Forwarding Address:** \_\_\_\_\_

(Home address)

**Telephone:** \_\_\_\_\_

**Non-MSU E-Mail:** \_\_\_\_\_

9. **Employment:** Please list the name of the institution or company where you will be employed after you receive your degree and the position you will hold (e.g., postdoc, research scientist, etc.).

**Employed By:** \_\_\_\_\_  
(Employer name and address)

**Position Title:** \_\_\_\_\_ **Start Date** \_\_\_\_\_

**Received** \_\_\_\_\_ **(Academic Program Coordinator Signature)** \_\_\_\_\_ **(Date)**

c: Business Office, tech@chemistry.msu.edu, Main Office