

Participant's name: _____ Participant's Age (if Minor) _____

**University of California at Berkeley
And College of Engineering
Invention Lab Waiver of Liability, Assumption of Risk, and Indemnity Agreement**

Waiver: In consideration of being permitted to participate in any way in what is hereinafter called "The Shop Activity", I, for myself, my heirs, personal representatives or assigns, **do hereby release, waive, discharge, and covenant not to sue** The Regents of the University of California, its officers, employees, and agents from liability **from any and all claims including the negligence of The Regents of the University of California, its officers, employees and agents**, resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in The Invention Lab Shop Activities.

Signature of Parent/Guardian of Minor & Date

Signature of Participant & Date

Assumption of Risks: Participation in The Invention Lab Shop Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks generally include: 1) possible particulate or fume inhalation, 2) cuts, scratches, bruises, and sprains from equipment or slippery floors, 3) noise from the loud machines, and 4) eye injury or loss of sight.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in The Invention Lab Shop Activity. I hereby **assert that my participation is voluntary and that I knowingly assume all such risks.**

Indemnification and Hold Harmless: I also agree to INDEMNIFY AND HOLD The Regents of the University of California HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in the Invention Lab Shop activity and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgment of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and **understand that I am giving up substantial rights, including my right to sue.** I acknowledge that I am signing the agreement freely and voluntarily, and **intend by my signature to be a complete and unconditional release of all liability** to the greatest extent allowed by law.

Acknowledgement of Specific Conditions:

By subscribing my initials hereto, I acknowledge that in general, students are eligible to use the Invention Lab only during posted open hours when a technician is on duty; graduate student lab assistants are eligible to use the Invention Lab during Fall and Spring semesters both at posted and after-hours, but only after proving competence to shop staff. If competence is unproved, then the student may only use the shop while supervision is present. No untrained students may use the lab's machines. ____ (Initial).

By subscribing my initials hereto, I acknowledge that if I fail to attend an Invention Lab Orientation session, or allow unauthorized access and use, I will not be permitted to access the Invention Lab Shop and fees will not be refunded. ____ (Initial).

By subscribing my initials hereto, I acknowledge that my University of California identification card, which allows access to the Invention Lab Shop is not transferable, and that fraudulent use thereof will result in confiscation of such, and cancellation of privileges, and penalty payment equal to the full Shop user fee to reactivate such privileges ____ (Initial).

By subscribing my initials hereto, I acknowledge that if, due to my negligent and misuse of shop equipment, repairs are required, I will be liable to pay for such repairs, must re-attend the Invention Lab shop safety and use course. In severe or repeated cases of misuse, I may have use privileges removed or may be restricted to use the Invention Lab shop only with direct supervision. ____ (Initial).

Signature of Parent/Guardian of Minor & Date

Signature of Participant & Date

Shop Safety Program

Student Shop - Functional Abilities Statement of Understanding

The purpose of this document is both to provide information on the functional abilities required to work safely in a "Shop", or a "Lab" where potentially hazardous "shop processes" may occur, and to document that the undersigned student has been so informed.

Information about what is required to work safely in a shop or lab is being provided because it is the student's responsibility to voluntarily and confidentially disclose information regarding the nature and extent of a disability or another reason that may prevent them from working safely in a student shop. The University cannot assume responsibility for providing accommodations, services or a safe learning environment to students who have not identified any/all functional limitations (due to a disability/other reason) that could interfere with their ability to work safely.

If you have a disability/other reason that may prevent you from safely meeting the functional abilities as stated in the attached handout, you are encouraged to contact the Shop Manager / Supervisor to make them aware of possible safety and accommodation needs, and to contact UC Berkeley's "Disabled Students Program" [<http://dsp.berkeley.edu/> or phone 510-642-0518] that is available to assist in developing student accommodation strategies.

Please note that academic program requirements will not be waived, but accommodations may be made to assist you to meet requirements.

**This form is to be completed upon admission to each and every Student Shop program
where a student seeks shop-use privileges.**

_____ I have read, had the opportunity to ask questions concerning, and I understand the *Functional*
(initials) *Abilities Requirements* specific to a student working safely in compliance with the
UC Berkeley Shop Safety Program.

_____ I am able to meet the *Functional Abilities Requirements* as **presented** in the following pages.
(initials)

O R

_____ I am able to meet the *Functional Abilities Requirements* as presented, if I am given the
(Initials) following accommodations:

Print Name of Student _____ **Student ID # / DOB:** _____

Signature of Student _____ **Date** _____

Student Shop Name _____ **Student Shop Manager Initials** _____

(To conserve resources, please print using both sides of paper.)

Students - Return completed form to the Student Shop Manager for each and every Student Shop you are enrolled in. Keep the following pages as your reference to the function-abilities required to safely work in a shop.

UNIVERSITY OF CALIFORNIA - BERKELEY
Shop Safety Program
Student Shop - Functional Abilities Requirements

GROSS MOTOR SKILLS:

- Keep or regain balance, or stay upright when in an unstable position
- Ability to lift, push, pull, or carry objects in your hands

FINE MOTOR SKILLS:

Ability to make precisely coordinated movements of the fingers of one or both hands to grasp, manipulate, or assemble very small objects
Quickly and repeatedly adjust the controls of a machine to exact positions

PHYSICAL ENDURANCE:

Must be able to lift and carry a minimum of 30 pounds
Ability to stand for extended periods of time

HEARING:

Respond appropriately to sounds at a close range (within a few feet of the listener)

VISION:

See details at a close range (within a few feet of the observer)
See the colors **blue, yellow, green, orange, red, white,** and **black** for understanding safety signage and machine controls
Able to read / understand digital and analog read-outs of dial / digital gages

ENVIRONMENT:

Ability to work indoors in long pants, long-sleeve shirt, closed-toed shoes, and, as necessary, work-gloves in a shop, or a lab where shop processes are conducted
Ability to maintain concentration and otherwise safely work in areas where multiple and varied hazardous work processes may be going on simultaneously, and to recognize nearby hazards not necessarily directly associated with your own work
If necessary, the ability to work outdoors in large-scale fabrication/assembly areas wearing bulky-clothing required for warmth and protection from weather, as well as personal protective equipment.

READING & WRITING:

Sufficient English fluency/literacy (verbal and written) to:

Recognize the meaning and spelling of names / words / symbols associated with equipment operation (e.g. start, stop, on, off, caution, danger, hazard, !!!, Δ, etc...)
Understand written sentences and paragraphs in work-related documents/procedures
Ability to communicate effectively with others in writing and speaking basic English

MATHEMATICS:

Working knowledge of arithmetic, algebra, geometry, trigonometry and their applications

EMOTIONAL STABILITY AND SELF AWARENESS:

- Ability to focus attention on a task and follow it through to completion
- Manage your own emotions around hazardous processes
- Accept responsibility for ensuring your behavior conforms to safety rules.
- Maintain professional/collegial relationships conducive to cooperation in a workplace.
- Ability to self-assess and determine whether your physical / mental condition allows you to work safely and to stop work when you are tired or otherwise compromised
- Ask for help when needed
- Willingly provide assistance when asked
- Adapt to changing work environments
- Appropriately and promptly respond to unexpected situations.

ANALYTICAL THINKING:

- Ability to logically problem-solve where a solution is not obvious
- Able to consider the relative “costs” versus “benefits” of potential actions, taking into account hazards that are present, and then, to choose the most appropriate safe-work practices to get the job done safely and efficiently.

CRITICAL THINKING:

- Ability to identify when something is wrong, or anticipate when something is likely to go wrong, and implement corrective actions
- Ability to apply general safe-work rules to specific problems to conduct work safely

INTERPERSONAL SKILLS:

- Negotiate interpersonal conflict
- Demonstrate tolerance in working with others
- Identify unsafe work being done by others, and help assist them to work safely
- Function as part of a team

COMMUNICATION SKILLS:

- Effectively communicate information and ideas so others understand your message

WORK STYLES:

- Maintain housekeeping rules in your work area and clean up messes you find
- Follow procedures and identify opportunities to improve safety procedures to shop management.

In compliance with the Americans with Disabilities Act as well as other laws, the University of California makes every effort to insure a high-quality and safe educational experience for students.

The University follows the "[Guidelines Applying to Nondiscrimination on the Basis of Disability](http://www.ucop.edu/ucophome/coordrev/ucpolicies/aos/uc1450.html)".

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