**STORAGE OF CHEMICALS**

**Store Location: Store for Temporary Storage of Chemicals J13/030,**

**School of Pharmaceutical Sciences**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **No.** | **Code No.** | **Name of Chemical** | **Quantity** | **Date of Storage** | **Expiry date of Chemical** | **Safety Data Sheet( SDS) Attached (X/✓)** | **Notes** |
| 1 |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |

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| **Student’s Details :**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(Signature)*  **Name:**  **Main Supervisor’s Name:**  **Discipline:**  **Date:** |

|  |
| --- |
| **Lecturer’s /Staff’s Details :**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(Signature)*  **Name:**  **Discipline:**  **Date:** |