

Yale *Environmental Health & Safety*

Request for Background Check Form

- Write legibly or type form.
- Obtain applicant and authorizer signatures.
- Do not attach a check. Payment will be made by EHS and charged to the COA listed below.
- Return the completed forms to Michael Kaseta at michael.kaseta@yale.edu or by fax at 203-785-7588. If you have any questions, please contact Michael Kaseta at 203-737-2104.

Today's Date:	
Principal Investigator	
Name:	Email:
Phone:	Fax:
Department name:	Campus Address:
Employee's name:	
Based on my direct knowledge and observation of the above named individual, I consider this person trustworthy and reliable. I recommend this individual to be approved for unescorted access to certain University equipment that is subject to special access controls.	
Supervisor signature:	Date:
Business Office Contact	
Name:	Email:
Phone:	Fax:
Department name:	Campus Address:
Charging Instructions <i>Indicate the COA charging instructions. EHS will process the payment.</i>	
Company:	
Yale Designated:	
Grant:	
Gift:	
Cost Center:	
Program:	
Project:	
Spend/Revenue Category:	
Ledger Account:	
Location:	
Assignee:	
Authorizer (Business Office of the Principal Investigator)	
Name:	Signature:
Date:	