## Non-PI Personnel Screening Form UCSB Controlled Substance Program

## **Environmental Health & Safety**

All proposed handlers of controlled substances (CS) must submit a Personal Screening Data Sheet to EH&S, per UCOP BUS 50 and 21CFR1301.90.

Applicant: Complete and submit this form to your PI for signature. Return form to EH&S by:

• Fax (805-893-8659), or Mail (Attn: Derek Iverson, MC: 5132)

	as CS Lab Cor	ntact (Circle one: Prima	ry / Secondary) I Substance Shipments)
Name:		Date of Birth:	
CA Driver's License/ID #:			t #:
Home Address:			
Lab/Office Location:		_ Phone Number: _	
E-Mail Address:		Mail Code:	
Within the past five years, have you been co are you presently formally charged with com offenses, or military convictions, except by offense, location, date, and sentence on add	nmitting a crimir general court-m	nal offense? (Do not in	clude any traffic violations, juvenile
	Yes	☐ No	
In the past three years, have you ever know prescribed to you by a physician? If the ans			
	Yes	☐ No	
Have you ever surrendered a controlled subsuspended, or denied?	stance registra	tion or had a controlled	substance registration revoked,
	Yes	☐ No	
By signing below, I authorize inquiries of conconvictions. I understand that any false information jeopardize my position with the University. It substances in non-human research at UCSI in the application.	rmation, omissiດ nformation inclu	on of information, or mi ided herein will not pre	suse of controlled substances will clude me from utilizing controlled
The DEA requires that an employee who had employee is obligated to report such information reports can be made confidentially to the Confficials and initiate an investigation on the aim all confidential inquiries.	ation to a respo ontrolled Substa	nsible security official o Inces Program Manage	of the employer. At UCSB, all such er who will inform the appropriate
Applicant signature:			Date:
PI authorization for the person (identified	d above) to har	ndle controlled substa	ances issued to the PI:
Principal Investigator (Print):			DEA Reg #:
Principal Investigator signature:			Date: