

# California Institute of Technology

## CONTROLLED SUBSTANCES AUTHORIZED PERSONNEL REGISTRATION FORM

**Principal investigators (PI):** Use this form to add an Authorized Person to your Controlled Substance Authorization.

Add as an Authorized Person

Designate as Lab Controlled Substances Custodian

### Applicant:

You are being proposed as a handler of controlled substances. (21 CFR 1301.90). Before you can handle controlled substances, we need the following information. You also need to authorize Caltech to conduct a background investigation. Failure to authorize the background investigation, and be approved, may preclude you from handling controlled substances at Caltech. Human Resources will inform you about the background investigation process.

Please fill out the following information. Return the completed form to your Central Controlled Substances Custodian, EH&S M/C 25-6 or OLAR M/C 156-29.

### APPLICANT INFORMATION:

I am a:  Caltech Employee  Affiliate  Visiting Researcher  Other: \_\_\_\_\_

Name: \_\_\_\_\_ UID #: \_\_\_\_\_

Lab/Office location: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Mail Code: \_\_\_\_\_

Please check the applicable boxes below:

Within the past five years, have you been convicted of a felony, or within the past two years of any misdemeanor, or are you presently formally charged with committing a criminal offense? (Do not include any traffic violations, juvenile offenses, or military convictions, except by general court-martial.) If the answer is yes, furnish details of conviction, offense, location, date, and sentence on *additional page*.

Yes  No

In the past three years, have you ever knowingly used any narcotics, amphetamines, or barbiturates, other than those prescribed to you by a physician? If the answer is yes, furnish details on *additional page*.

Yes  No

**Please hand deliver any *additional pages* to Caltech Human Resources/Employee Relations at 367 S. Holliston Ave., Ste. 206.**

I understand that a criminal background check will be conducted on me by an outside investigative consumer reporting agency and that I will be required to provide information such as my date of birth and by social security number. Human Resources will give me information about authorizing this background check. I understand that any false information or omission of information will jeopardize my position or my affiliation with Caltech.

By signing below, I authorize inquiries of courts and law enforcement agencies for convictions. Information furnished or recovered as a result of any inquiry will not necessarily preclude employment, and or participation in Institute research but will be considered a part of an overall evaluation of my qualifications.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PI authorization for the person identified above to handle controlled substances issued to the PI:**

Principal Investigator signature: \_\_\_\_\_ Date: \_\_\_\_\_

Principal Investigator name: \_\_\_\_\_