

**UNC-CH Department of Physics and Astronomy
LIABILITY VERIFICATION**

This form is to be completed by anyone working in a research lab that is not on the UNC payroll or a UNC student¹.

If you are not on official business², you must furnish a letter (on official letterhead) from your home institution stating that you are covered by their liability insurance before beginning laboratory work of any type.

Lab Supervisor _____ **Room(s)** _____

Name of Institution

Street Address _____ **City** _____ **State** _____ **Zip** _____

Employment Status or Sponsoring Program*

I, (print name) _____, **certify that I am an official participant in**
the above program at said Institution and am covered by their liability insurance
for the period of (dates of coverage) _____ **to** _____ .

Signed _____ **Date** _____

¹UNC students are classified as:

- a) those currently enrolled in a UNC course
- b) those who were enrolled in the spring semester and are pre-registered for the fall semester
- c) our graduate students if they are pre-registered for the fall semester
- d) incoming grad students if they are on payroll as "students" during the summer before their first semester

²Official business is a visit on behalf of an institution, as an employee or participant of a formal institutional program, such as REU.