

Personnel Screening Data Sheet - UCSD Controlled Substance Program

Environment, Health & Safety, UCSD

Principal investigators: Use this form to add an Authorized Personnel to your Controlled Substance Usage Authorization (CSUA). The following is to be filled out by all proposed handlers of controlled substances (CS) (21CFR1301.90). Return the completed form to the Controlled Substance Program Manager at Mail Code 0089 or fax 858-822-0561 or scanned & emailed to ehscs@ucsd.edu.

- APPLICANT INFORMATION:**
- Add to CSUA as an Authorized Personnel
 - Designate as CS Lab Contact (Circle one: Primary / Secondary)
 - Authorized Recipient (OK to Pickup Controlled Substance Shipments)

Name: _____ Employee/Student/Passport #: _____

Lab/Office location: _____ Phone: _____

E-mail address: _____ Mail Code: _____ CSUA#: _____

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

By signing below, I authorize inquiries of courts and law enforcement agencies for possible pending charges or convictions. I understand that any false information, omission of information, or misuse of controlled substances will jeopardize my position with the University. Information included herein will not preclude me from utilizing controlled substances in non-human research at UCSD, but will be considered as part of the overall evaluation of qualifications in the application.

The DEA requires that an employee who has knowledge of drug diversion from his/her employer by a fellow employee is obligated to report such information to a responsible security official of the employer. At UCSD, all such reports can be made confidentially to the Controlled Substances Program Manager who will inform the appropriate officials and initiate an investigation on the allegations. The protection of an individual's right to privacy will be upheld in all confidential inquiries.

Applicant signature: _____ Date: _____

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

Principal Investigator signature: _____ Date: _____

Principal Investigator name: _____