

When employees are required to wear safety glasses AND have vision correction needs, the employer is responsible for providing one of the following:

- Option 1: Appropriate ANSI Z87.1 – approved safety glasses that can be work over prescription lenses,
OR
- Option 2: Appropriate ANSI Z87.1 – approved safety glasses with suitable corrected lenses

To obtain prescription safety glasses:

1. After verifying with your PI/Supervisor the need to purchase prescription safety eyewear, complete this pre-authorization form.
 - Contact EH&S at 650-723-0448 for questions regarding safety glasses requirements.
2. Ensure you have a current prescription for corrective lenses (no older than two years).
3. Bring your current prescription and this signed Prestige Lens Lab Pre-Authorization Form to the next Prestige Lens Lab Event.
 - Event dates are advertised at ppe.stanford.edu

_____ (School/Department/Lab Name) authorizes Prestige Lens Lab to charge the Purchase Order below up to \$_____ for the purchase of ANSI Z87.1-approved prescription safety glasses by the requester below.*	
Requester Name (First and Last):	
SUNet ID:	Email Address:
Telephone Number:	

I approve the purchase of prescription safety eyewear for the above employee for work purposes.	
PI/ Supervisor Signature:	
PI/ Supervisor’s Name (First and Last):	
Date:	

The above requester is authorized to purchase prescription safety glasses through the Purchase Order Number below.	
Authorized Financial Signature:	
Authorized Name (First and Last):	Email Address:
Purchase Order Number:	

*Additional cost: Any cost incurred beyond the allotted coverage level indicated above is the responsibility of the requester and is to be paid to Prestige Lens Lab at the time of purchase.

For additional questions, contact EH&S at 650-723-0448 or visit <https://ppe.stanford.edu>

This form must be completed in its entirety in order to be considered valid.

