INSTITUTE OF MATERIALS SCIENCE - INSTRUMENTATION USE REQUEST

*Each instrument required should be listed on the instrument use request form*

Date Initiated: ___________________ Faculty Member requesting use (please print)

______________________________

Dept: ________________________ Phone: _______________ Email address: __________________________________

Requesting Faculty Member's signature: ______________________________________________________________

Research Account, Agency, & value of the award the instrumentation will support: ________________________________

_________________________________________________________________________________________________

Name of Grad Student or PostDoc that will be using the instrument (please print): _________________________________

_________________________________________________________________________________________________

____________________________________________________________________________

IMS Policy - instruments in IMS are not for use by undergraduates.

Please email this request to DEBORAH.PERKO@UCONN.EDU with a cc to: STEVEN.SUIB@UCONN.EDU

Before using IMS instrumentation the proposed user must pass the IMS Safety exam and be properly trained on
the instrument. Student should present a copy of this form when using the equipment on the initial visit.


Authorization precedes use of instrumentation.

You will be in contact with the appropriate staff or faculty member to arrange usage.

Office Use Only:

Lab: ________________________________ Lab: ________________________________

Equipment: ________________________________ Equipment: ________________________________

IMS Contact: ________________________________ IMS Contact: ________________________________