Name: ________________________________  Date: ______________________________

PI’s Name: ________________________________  E-mail Address: ______________________________

Lab Room # (PSC, RSC, NSC, Kell or STA): __________  Panther Card #: 601708 ______________________________

Lab Phone #: 404-413 ______________________________  Cell Phone #: ______________________________

<table>
<thead>
<tr>
<th>Rm #</th>
<th>Equipment to be Used</th>
<th>Access</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSC 539/659A</td>
<td>Film Developer</td>
<td></td>
</tr>
<tr>
<td>NSC 473</td>
<td>Film Developer</td>
<td></td>
</tr>
</tbody>
</table>

Equipment Use Fee for using the film developer: $2.00 per film. This fee is to offset the cost of fixer and developer.

Signature:
____________________________________

*As a member of the Research Faculty at Georgia State University, I understand that my Department and I are responsible for any damage that may occur as a result of the use (or misuse) of the core facility by the student/staff member (named above) and that we will recompense the core facility for any damage to equipment or facility that occurs as a consequence of this use.

PI’s Signature:
____________________________________

Approved by Core Director / Dept. Chair:
____________________________________

Return to: Sonja Young (PSC 519) along with a copy of your Panthercard (FRONT & BACK)

Authorization:
____________________________________

Training Date: ______________________________

Security Date: ______________________________

Introduction to Equip training Date: