Name: ________________________________

PI's Name: __________________________

Lab Room # (PSC, NSC or Kell ): ________

Lab Phone #: (404) 413 ________

Date: ____________________

E-mail Address: _______________________

Panther Card No. 601708 _____________

Cell Phone #: ________________

<table>
<thead>
<tr>
<th>Location</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>
<tr>
<td>Kell 439A</td>
<td>Film Developer</td>
<td>☐</td>
</tr>
</tbody>
</table>

Signature: ____________________________

*As a member of the Research Faculty at Georgia State University I understand that my Department and I are ultimately responsible for any damage that may occur as a result of the use (or misuse) of equipment in 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 Director / Dept. Chair*: ____________________________

Return to: Debby Walthall (PSC 519) along with a scanned copy of your Panthercard (FRONT & BACK)

Authorization: ____________________________