Name: ________________________________ Date: __________________________

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

Lab Room # (PSC, RSC, NSC, Kell or STA): __________

Lab Phone #: 404-413 __________________________

<table>
<thead>
<tr>
<th>Rm #</th>
<th>Equipment to be Used</th>
<th>Access</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSC555</td>
<td>Fortessa</td>
<td>☐</td>
</tr>
</tbody>
</table>

Equipment Use Fee for using the Fortessa: $25.00/hour; $5.00 Setup fee.

Equipment Fee is subject to change without notice.

*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: __________________________

Flow Discussion Date: __________________________

Diva Software Date: __________________________

Fortessa/Canto Training Date: __________________________

Security Date: __________________________

Introduction to Equip training Date: __________________________