Name:

Pl's Name:

Lab Room \# (PSC, RSC, NSC, Kell or STA): $\qquad$

Lab Phone \#: 404-413 $\qquad$

Rm \# Equipment to be Used Access

## NSC338A

Accuri C6
PSC535
Fortessa

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

Equipment Use Fee for using the Accuri:
\$20.00/hour

Equipment Fee is subject to change without notice.

Date: $\qquad$

E-mail Address: $\qquad$

Panther Card \#: 601708 $\qquad$

Cell Phone \#: $\qquad$

## Signature:


#### Abstract

*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.


Pl'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:

$\qquad$
Diva Software Date: $\qquad$

## Fortessa/Canto Training Date:

$\qquad$
Security Date: $\qquad$
Introduction to Equip training Date:

