

# UNCC TEM Usage Application Form

User Name: \_\_\_\_\_ Date \_\_\_\_\_

User Affiliation:  UNCC  Industry  Other University: \_\_\_\_\_

Department: \_\_\_\_\_

UNCC User Account No.: \_\_\_\_\_ Non-UNCC User PO No.: \_\_\_\_\_

User Phone No.: \_\_\_\_\_ User Email: \_\_\_\_\_

Supervisor: Name: \_\_\_\_\_ Tel.: \_\_\_\_\_

Supervisor: Email: \_\_\_\_\_

Brief project/research description: \_\_\_\_\_

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Sample(s): \_\_\_\_\_

By signing this form I acknowledge that I will abide by the TEM facility and laboratory rules and regulations and I and/or my supervisor will be responsible for the cost of any damages resulting from not following the rules or instructions or misuse of the TEM, TEM accessories or TEM sample preparation equipment.

User signature: \_\_\_\_\_ Date \_\_\_\_\_

Supervisor signature \_\_\_\_\_ Date \_\_\_\_\_