

**Department of Chemistry/NanoTech Institute Cost Center
Request for Certification and Training**

Double-click on the text boxes below to fill in the form.

I have read and understand the Policies, Procedures, Catalog of Services of the NanoTech Institute/Department of Chemistry.

Operator:

Operator NetID: _____ Operator Date of Birth: _____

Operator Signature: _____ Date: _____

Supervising Faculty/Staff:

Default Cost Center Number:

Cost Center End Date:

Faculty/Staff Signature: _____ Date: _____

For Cost Center Use Only

Equipment Trainer: _____

Equipment Trainer Signature: _____ Date: _____

The operator listed above has been properly trained and has shown proficiency in using the equipment listed above, and has (limited unlimited) access to the equipment described. If access is limited, please describe below:

DMA TGA DSC UV-Vis Flourimeter FTIR Raman SEM

AFM Instron Fuel Cell Testing MPMS PPMS EPR

Signature of Facilities Director

Return completed form to Steve Collins, Mail Station BE26, or Office Berkner Hall 2.304.