

# UF Nanofab Lab Use Request Form

***Attention: Page 1 must be typed (filled in) on line, then printed.***

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User name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Email address: \_\_\_\_\_ Office Phone: \_\_\_\_\_  
 Department: \_\_\_\_\_  
 Campus Address: \_\_\_\_\_  
 Principal Investigator \_\_\_\_\_  
 PI Email Address \_\_\_\_\_ PI Fax \_\_\_\_\_  
 Project Name \_\_\_\_\_

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*\* The following questions are necessary to establish your status at UF. They must be answered completely*

What is your title/position at UF: *(please check one)*

- Undergraduate Student
  - Graduate Student: MEng MS PhD *(circle one)*
  - Post Doctoral Fellow
  - Professor/Academic Staff
  - Non-academic Staff
  - Visiting Scientist
  - UF Staff  Other: \_\_\_\_\_ *(specify)*
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**Project description:** Provide process descriptions so that we may determine the compatibility of process within the facilities. Materials used in the processes must be listed. New and unusual materials will be reviewed for compatibility by the oversight committee. Be as detailed as possible and attach documents as needed.

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### Pre UFNF Admission Checklist

The training checklist can be completed as the training is completed. Basic user access to the facilities cannot be granted until the basic safety training is complete.

The following links will give you information allowing you to meet the basic requirements;

<http://www.ehs.ufl.edu/Lab/LabSafe.pdf>

<http://www.ehs.ufl.edu/Lab/CHP/default.asp>

THE UFNF LABORATORY SAFETY MANUAL IS UNDER CONSTRUCTION.

	User Initials	Date
Project work reviewed by your PI?		
Completed UF Chemical Hygiene Training?		
Completed a Chemical Hygiene Plan with your PI?		
Read and understand the UF Laboratory Safety Manual?		
Read and understand the UF Nanofabrication Lab Safety Manual?		

### Equipment Use Agreement

	User Initials	Date
I agree that before using any process tool or instrument within UFNF I will read the SOP (Standard Operating Procedure)?		
I agree that before using any process tool or instrument within UFNF I will receive "hands on" tool operation training and User Certification from a UFNF Staff Engineer.		
I understand that I am not allowed access to process tool service equipment (gas cabinets, vacuum pumps, chillers, etc.) and service areas. I also understand that I may not adjust equipment parameters that are not covered in the SOP without UF Staff Supervision or permission.		

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**Faculty Approval**

The above individual will be working under my supervision on the specified UFNF user project. This user authorization is only for the work on the above named user project as part of the individuals work for me while s/he is a resident of UF. I understand that it is my responsibility to notify UFNF Staff of the completion of this work or of the completion of this user's term at UF, which ever comes first.

**Faculty Member :** \_\_\_\_\_

**Signature of Faculty Member:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Source of Funds – Account # / Chart field :** \_\_\_\_\_

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**Applicant Signature**

I agree to abide by all policies and instructions contained therein regarding the use of UFNF. Failure to read and understand the policies, and failure to act in a safe and courteous manner exposes me to dismissal from the facility without recourse. All personal information contained on this application is correct.

**Signature of User:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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*\*please don't write below this line*

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**UFNF Staff Approval**

**Staff Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**UFNF Admin assigned user ID:** \_\_\_\_\_