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|--|-------|----------------------------|---------|
| Name* | NetID | Title* | |
| | | Faculty Staff | Student |
| Advisor/Supervisor Authorization (signature required for students) | | IMS Access Card Requested* | |
| | | Yes | No |

Lab Request (must be signed by authorized lab personnel)

AFM Lab Authorization: _____

Clean Room Authorization: _____

GCMS Lab Authorization: _____

GPC Lab Authorization: _____

Mechanical Testing Lab Authorization: _____

NMR Lab Authorization: _____

Surface Science Lab Authorization: _____

TEM Lab Authorization: _____

Thermal Analysis Lab Authorization: _____

X-ray Lab Authorization: _____

Miscellaneous Lab Authorization: _____

IMS Safety Training is mandatory for IMS laboratory access. Please verify that you have completed IMS Safety Training:

I HAVE completed IMS Safety Training

I HAVE NOT completed IMS Safety Training

EH&S Safety Training is mandatory for IMS laboratory access. Please verify that you have completed EH&S Safety Training:

I HAVE completed EH&S Safety Training

I HAVE NOT completed EH&S Safety Training

Requestor Signature: