

By signing this form, the user and principal investigator agrees to abide by UH Nanofabrication Facility policies.

The user must complete General Laboratory Safety Training to use the lab.

User Information

First Name	
Last Name	
Email	
Phone	
Signature _____	Date _____

Principal Investigator Information

First Name	
Last Name	
Email	
Phone	
Institution/Company	
Department	
Signature _____	Date _____

Billing Information

First Name	
Last Name	
Address	
City, State, Zip	

Send the completed New User Form and General Laboratory Safety Training Certification to lvchang@central.uh.edu.