

Requestor Name*	Title*	IMS Access Card Requested?*
	Faculty	Yes
	Student	No
	Staff	

Advisor/Supervisor Authorization: Required for Students.

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## Lab Request

AFM Lab (022) Authorized Signature: \_\_\_\_\_

Clean Room (311B) Authorized Signature: \_\_\_\_\_

GCMS Lab (314) Authorized Signature: \_\_\_\_\_

GPC Lab (214) Authorized Signature: \_\_\_\_\_

Mechanical Testing Lab (012) Auth. Signature: \_\_\_\_\_

NMR Lab (011) Authorized Signature: \_\_\_\_\_

Surface Science Lab (023) Authorized Signature: \_\_\_\_\_

TEM Lab (016/A/B/C) Authorized Signature: \_\_\_\_\_

Thermal Analysis Lab (217) Authorized Signature: \_\_\_\_\_

X-ray Lab (017/018) Authorized Signature: \_\_\_\_\_

Miscellaneous Lab Authorized Signature: \_\_\_\_\_

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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: