## PART 2: Accessibility Form to use TAS lab (OM47) MUST BE SUBMITTED AND APPROVED PRIOR TO TRAINING OR ANALYSES

The instrumentation in the MC<sup>2</sup> labs is extremely sensitive and expensive. If it is not treated with care or is used incorrectly, it could be rendered unusable for extended periods. Even under service contract, many things will take weeks to get fixed. Service contracts do not cover negligence on the part of the

users. To keep all of the equipment functioning properly for everyone, refer to the guidelines in PART 1.

Applicant Information (Please fill in BLOCK letters)					
Name (First/Last):					
Designation (ex., Undergraduate, Ph.D., PDF, etc.)				Phone:	
Email address:					
Department/Company: Mc			/IcGill	ill ID:	
Supervisor/P.I.'s Information					
Name (First/Last):					
E-mail:				Phone:	
FOAPAL number to be charged/ PO#:					
Facility Training Available/Required/Service					
□ TGA 5500 Disc., TA Inst.	□ TGA Q500, TA Inst.	CARY 5000 UV-VIS- near IR, Agilent		<ul> <li>UV-Vis Evolution 260,</li> <li>Thermo Fisher Scientific</li> </ul>	
DSC 2500 Disc., TA Inst.	IGA Q50, TA Inst.	FTIR Spectrum II, F	ΡĒ	□ FTIR Vertex 70, Bruker	
DSC Q2000, TA Inst.	□ TGA/DSC1, Mettler				
🗆 TGA-FTIR, PE	🗆 TGA-FTIR-MS, PE	□ TGA-FTIR-GC/MS, PE			
Yes, I need TAS staff to perform the analysis!					
Sample/Project					
Name:					
What are you trying to determine?					
Method (for TGA and DSC users):					
Heating rate (°C/min): Gas (N2/Air):		Ν	/laxim	um Temp (°C):	
Agreement					
Applicant: I have read, understood and agreed to comply with the terms and conditions in Part 1 of this form. I understand that any violation could result in my being barred from entry and/or use of facilities in future.					
<u>Supervisor/PI</u> : I have completed the Supervisor/P.I.'s Particulars of this form. I have read and agreed to the Part 1 of this form and Charging Scheme appended with this form. I am agreeable with my student/staff to apply to use the QCAM facilities. I am agreeable with the occurring fees to be charged to my funding account.					
Signature of applicant:				Date:	
Signature of Supervisor/PI:				Date:	



