

Materials Characterization Center (MC²) User Account

Name: _____ Department & Grade: _____

Phone: _____ E-mail: _____

Advisor: _____ Account No: _____

Requested Username: _____ (please include your last name)
(you **MUST** remember your username)

Requested Account(s):

Philpis CM20 TEM: _____ (9am-5pm, Mon-Fri) _____ (24 hours, including weekends)
VCR Ion Mill: _____ (9am-5pm, Mon-Fri) _____ (24 hours, including weekends)
Gatan Duomill: _____ (9am-5pm, Mon-Fri) _____ (24 hours, including weekends)
Philips XL-30 SEM: _____ (9am-5pm, Mon-Fri) _____ (24 hours, including weekends)
Simens D5000 XRD: _____ (9am-5pm, Mon-Fri) _____ (24 hours, including weekends)
Optical Microscopy: _____ (9am-5pm, Mon-Fri) _____ (24 hours, including weekends)
Sp. Prep. Facility: _____ (9am-5pm, Mon-Fri) _____ (24 hours, including weekends)

Research Topic: _____

Related EM Experience (classes, short courses, previous EM experience, EM models used, etc.):

Agreement:

I certify that I am trained and approved for the indicated use of the above instruments. I certify that the account(s) listed above is/are active and valid, and that charges for my use of the above facilities will be withdrawn from the said account(s). I will also keep the facility informed of any changes in the above account(s) with regards to the billing. I also understand the billing against the account(s) will follow the regulations posted in the Materials Characterization Center (MC²), and are subject to changes.

I will adhere to all regulations of the MC² facility usage. I assume the responsibility, both financial and otherwise, for any damage I may cause to the MC² equipment or facilities due to gross and repeated negligence on my part.

User signature: _____ Date: _____

Advisor signature: _____ Date: _____

MC² Director
Approval: _____ Date: _____

WAVIER AND RELEASE

The Undersigned, for and in consideration of being permitted to use the facilities and equipment of the University as described below, hereby releases and waives any and all claims whatsoever against University of California at Irvine (UCI), its trustees, officers, employees and agents from any liability or any loss, cost, damage, expense, injury or death arising from or in any manner connected with or related to the undersigned's use of UCI's facilities and equipment. Facility: MC² (Materials Characterization Center)

Name of User: _____
(Print Name)

(Signature)

(Date)

Name of Supervising Faculty/ PI member: _____
(Print Name)

(Signature)

(Date)