## Center for Chemical Genomics Intake Form

Please return this form to Rebecca Epstein at rebeps@umich.edu. Note that some of the below questions might need to be answered by a PI. If you are working in CCG's lab, please include copies of your lab safety certificates. We need either BLS009 or both BLS025w and BLS101w. Note that you will also need to schedule a lab safety tour before beginning work.

Date	PI Name
PI's Reconciler	PI Primary Department
Project Title (opti	onal)
Shortcode(s), not	e that at least one shortcode needs to be discretionary
UMCCC Nathan Shock	o any of the following organizations? (check all that apply) or Basic Sciences
Your Contact Info	
Name	
Institutional Ema	il UM ID No. (if applicable)
Phone	
If you have an es	timated end date for your work in CCG, include below.
Will you need acc	cess to MScreen?
Yes No	

Will you need access to LSI outside of normal business hours? LSI is open from 8 a.m. to 6 p.m. Mondays through Fridays, excluding holidays.

Yes No

Will you need training or access to the following instruments? (check all that apply)

PHERAstar Plate Reader

Envision Multimode Plate Reader

FlexStation3 Plate Reader

Hypercyt/Accuri High Throughout Flow System

Multidrop/Plate Washer

IXM-High Content Microscopy System