## University of California, Merced (UCM) Stem Cell Instrumentation Foundry (SCIF)

## **New SCIF User Application**

Part 1: User Information (to be filled out by the Professor, PI, or Supervisor)

Thank you for your interest in using UC Merced's SCIF facilities. We ask you to carefully read and fill out the following form. It is also important that all requested information be filled in and that this form is signed by the professor, PI, or supervisor. By submitting this form, you confirm that the researcher named below needs access to SCIF as part of his/her research activity. For laboratory users claiming the internal rate, you agree that your use of the facility and equipment is solely for the pursuit of UC Merced's academic and research interests. Violators may be barred from using the facility until approved by VCR. If the status of the researcher changes for any reason, you must notify the Laboratory Staff of the change.

Please check the SCIF mod	ule(s) you are interested in using:	
□ Cell Culture Facility		
☐ Clean Room and Microfa	brication	
☐ Confocal Microscopy		
$\hfill\Box$ Flow Cytometry and Cell	Sorting	
Researcher Name:		
E-Mail Address:		
Supervisor/PI Name:		
Institution:		
FAU (UC researchers) or I	PO# (non-UC researchers):	
Professor, PI, or Supervisor Signature:		Date:
I acknowledge that I have re (Cleanroom and Confocal) of any required EH&S safety to	ment (to be signed by the researcher performed and understood the SCIF Policies and Proprior viewed the web tutorials (Flow cytometry arrainings. I am aware of the hazardous material of SCIF's safety and operating procedures.	ocedures, Orientation Presentation and Cell Culture), and have completed
Researcher Name:		-
Researcher Signature:		Date:
For SCIF Use ONLY: Orientation Date: Rev. 7/2014	Training Completed On:	Rate: