



### **Biophysics NMR Center - External (Non-UM) User Information**

To request to use the Biophysics NMR Center, please complete and submit this form:

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Institution: \_\_\_\_\_

Status (select): \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Department: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

Supervisor/PI: \_\_\_\_\_

(if not user)

City, State, Zip: \_\_\_\_\_

Describe any previous NMR usage experience or training that you may already have:

Indicate the estimated level of technician service support that you will require (experimental design, sample prep, set-up, running experiment, data analysis, etc.), or whether you will be a self-user:

#### **Request Process:**

1. Complete and submit (email) this application form to the Biophysics NMR center manager at [debsahu@umich.edu](mailto:debsahu@umich.edu). Also request to set up an initial consultation time (no charge), where the type of samples, testing, and level of service support you require will be clarified.
2. After the initial consultation, you will be asked to submit a Sample Submission Form each time you request samples be processed. This form also includes billing information. If you will be a periodic on-site user, a training session will be set up, as well as log-on and billing mechanisms initiated.
3. I have read and understand the NMR Center User Policy and related instrument information at: <https://lsa.umich.edu/biophysics/resources/biophysics-nmr-center.html>

\_\_\_\_\_  
User Signature

\_\_\_\_\_  
Date

I am either the named user or the faculty advisor for the research group, and certify that the person named above is authorized to attend NMR training, use the Biophysics NMR Center facility, and incur associated charges.

\_\_\_\_\_  
Faculty/Research Advisor Signature

\_\_\_\_\_  
Date

(For NMR Personnel only - Consult/Training Date Scheduled for: \_\_\_\_\_)