

Biophysics NMR Center - Internal (U-M) User Information

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

First Name: _____ Last Name: _____

UMID: _____ Status: _____

Email Address: _____ Phone: _____

Research Group: _____ Department: _____

PI Shortcode #: _____ PI Name: _____
(for use fees):

PI email:
(shortcode owner)

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

Indicate the technician service support that you may require (experimental design, sample prep, set-up, running experiment, data analysis, etc.):

Training Procedure:

1. Complete and submit (email) this application form to the Biophysics NMR center manager at debsahu@umich.edu. Also request to schedule a training time (no charge for initial training session).
2. Visit <https://lsa.umich.edu/biophysics/resources/biophysics-nmr-center/request-nmr-time.html> for our policy on requesting NMR time.
3. If you need to cancel your training session, please notify the instructor at least three hours beforehand.
4. I have read and understand the NMR Center User Policy and related instrument information from <https://lsa.umich.edu/biophysics/resources/biophysics-nmr-center/request-nmr-time.html>

User Signature

Date

I am either the named user or the faculty advisor for the the research group, and certify that the person named above is authorized to attend NMR training and use the Biophysics NMR Center facility. I authorize payment as appropriate from the above indicated research account for this purpose.

Faculty/Research Advisor Signature

Date

(For NMR Personnel only - User Training Date Scheduled for: _____)