Western Nanofabrication Facility

Academic Service Work (Internal) Request For Service Work Provided By Nanofabrication Facility Staff – UWO Speedcode

This form is required for new customers who require work to be performed for them by Nanofabrication Facility Staff and will pay through a UWO Speedcode. Users who wish to be receive an access card and be trained to perform their own work will instead require the "Academic User (Internal)Form"

This information must be updated if billing information changes. This information will be maintained in the Nanofabrication Facility database of authorized users for billing future service requests.

User Name:	
Department or Unit:	
Γelephone Extension:	E-Mail Address:
Brief description of service(s) require	ed (e.g. SEM, FIB, Deposition, Fabrication, Characterization, etc)
	cation Facility to observe - long pants and clean closed toe shoes are required. and safety glasses must be worn at all times in the cleanroom. All users and visitors at the entrance.
The User and their Supervisor agree to acknowledge the Nanofabrication Facility in all publications and presentations referring to work performed in the Facility. As a courtesy, the Nanofabrication Facility should be notified of all publications resulting from work performed in the Facility.	
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For work that requires the development of personal acknowledgement or co-actions. Signature of User: Confirm the above individual will be Nanofabrication Facility Staff as particularly staff as pa	rformed in the Facility. As a courtesy, the Nanofabrication Facility should be grom work performed in the Facility. ent of non-standard processes by Nanofab staff, process engineering time plus a expected that suitable credit will be given in any resulting publications in the formatthorship, as appropriate. Date: Date: / Supervisor Approval – Billing Information e working under my supervision and requires service to be performed by of his/her or my research activity. I agree to pay for all materials and instrument urrent Nanofabrication Facility policy. This work is funded from a research grant
For work that requires the development of personal acknowledgement or coasing authority of confirm the above individual will be Nanofabrication Facility Staff as particularly that may be incurred as per compared to the personal acknowledgement or coasing authority and supervisor Name: Department or Unit:	rformed in the Facility. As a courtesy, the Nanofabrication Facility should be grom work performed in the Facility. ent of non-standard processes by Nanofab staff, process engineering time plus as expected that suitable credit will be given in any resulting publications in the formathorship, as appropriate. Date: Date: / Supervisor Approval – Billing Information e working under my supervision and requires service to be performed by of his/her or my research activity. I agree to pay for all materials and instrument urrent Nanofabrication Facility policy. This work is funded from a research grant d is eligible to be charged the Nanofabrication Facility Academic user fee rates.

Last Revised: 1/6/2010