

# Electron Microscopy Facility Internal User Agreement

New Application

Update Application

Date:

### 1. User Information:

Last Name	First Name Middle Initial			
Position Title	Faculty Advisor			
Home Department	Phone Number			
Brown Username (AuthID)	Brown Email			
Expected Completion or Departure Date from Brown				

#### 2. Default Account Information:

Account Driver WorkTag		Account PI or Responsible Person		
Program WorkTag (if applicable) PRG		Account Department		
Assignee WorkTag (if applicable)	A	Account Funding Agency		
Additional WorkTags		Account Expiration Date		
Account Description				
If Default Account PI is NOT the user's				
Faculty Advisor, please explain				

#### 3. Environmental Health & Safety Compliance:

By initialing here on the required Brown University that <u>I have attended and will remain current</u> on the required Brown University					
EHS training, which is required for ALL personnel who enter the Electron Microscopy Facility.					
Have you completed and remain current on the following EHS Training?					
Lab Safety Training	Yes	No 🗌	Hazardous Waste Training	Yes	No 🗌
IMNI Administrative Use					
Next Lab Safety Training D	Safety Training Due Next Hazardous Waste Training Due				

#### 4. Description of Research Project:

## 5. Instrumentation (indicate which of the following you intend to use):

	INSTRUMENT	LOCATION	IMNI Administrative Use				
	INSTRUMENT		USER CODE	ISSUE DATE	ISSUED BY		
	FEI Helios - FIB	ERC 020D					
	ThermoScientific APREO 2S	ERC 020E					
	FEI CM20 - TEM	ERC 020A					
	JEOL 2100F - (S)TEM	ERC 020C					
	FEI QuattroS - E SEM	ERC 020G					
	ThermoElectron - K-Alpha XPS	B&H 009					
Research Engineer Time (to conduct runs on your behalf)							
Have you been trained to use any of the above instruments before? Yes No							
Explain which instruments and where:							

### Electron Microscopy Facility Internal User Agreement

#### I hereby apply to use the IMNI Electron Microscopy Facility and agree to the following:

- 1. Laboratory Orientation and Instrument Training will be scheduled by the EMF Research Engineer via e-mail or phone. The training session must be completed within 30 days of this application or this application will need to be resubmitted with current information. I agree to review the current EMF Rate Schedule and understand there will be an Initial Training Fee. Information on rates and fees can be found at <a href="http://www.brown.edu/IMNI">www.brown.edu/IMNI</a>.
- 2. I certify that I have attended the required Environmental Health & Safety training sessions, Laboratory Safety Training and Hazardous Waste Training. I will maintain compliance with these training requirements that are mandatory for all EMF users. I understand that a lapse in training will result in the suspension of access privileges until training has been completed.
- 3. During the EMF training, I will be shown the location of the safety supplies and Material Safety Data Sheets of the most common chemicals used in the facility and the equipment. I will download the EMF Chemical Hygiene Plan from <a href="http://www.brown.edu/IMNI">http://www.brown.edu/IMNI</a>. I agree to read and familiarize myself with these documents and with the properties and risks of any chemicals used in the EMF. Please initial here: \_\_\_\_\_
- **4.** I agree to report instrument malfunctions or facility issues immediately to the EMF Research Engineer via email at: <u>Anthony McCormick@brown.edu</u>.
- 5. I agree to use my Brown University Identification Card as an access card to enter the facility and to supply information allowing the customary charges to be made for my use of the equipment and supplies. *I will not share my ID card or allow access to other user my access codes*.
- 6. I understand that I will be added to EMF email list, instrument reservation calendars, and temporary data storage system. I understand that I am responsible for my research data, and I agree to transfer my data from the temporary data storage system within 30 days.
- 7. I agree to provide any updated information on this agreement to the IMNI Administrative Office via email at: <u>IMNI@brown.edu</u>. I understand the expiration of the default account number will result in removal of my access privileges until an updated account has been provided.
- **8.** I understand that failure to abide by these terms may result in losing the privilege of using the facility either temporarily or permanently and my advisor or supervisor being notified of the reason(s).
- **9.** I hereby grant permission to Brown University and its representatives to take photographs or videos of me and/or to make recordings of my voice in the Electron Microscopy Core Facility and agree to the conditions outlined in the Brown University Image Use General Consent and Release Form.

User's Name (Please Print)	User's Signature	Date

Advisor's Name (Please Print)

Advisor's Signature

Date

#### **IMNI Administrative Use Only**

Fund Approval (Initial & Date) S		Safety Approval (Initia	afety Approval (Initial & Date)		Research Approval (Initial & Date)	
	Brown Group	Date Added		Brown Group		Date Added
	imni-emf-FIB_Users@brown.edu			imni-emf-Quattro_Users@brown.edu		
	imni-emf-LEO1530_Users@brown.edu			imni-emf-XPS_Users@brown.edu		
	imni-emf-CM20_Users@brown.edu			imni-emf-ALL_users@brown.edu		
	imni-emf-J2100F_Users@brown.edu					
Adding a user to Grouper will generate next-day card access after an overnight batch by CIS						
	Info added to EMF User Profile			Agreement to User & Faculty Advisor		
	Google Drive created for temp storage			Agreement to Dept Account Person		
	User invited to access Reservation Calend	ar		Agreement to Research Engineer		