ERTL user entry form

Name:______________________________________________________________

Phone:_____________  Email:__________________________________________

Advisor:___________________________________________________________

Dept.:____________________________________________________________

College:___________________________________________________________

Undergraduate_____  Graduate_____  Staff_____  Faculty_____  Other______

Name of project:____________________________________________________

Instrument needs:___________________________________________________

____________________________________________________________________

____________________________________________________________________

How did you find out about ERTL? ______________________________________

____________________________________________________________________

Is your research currently funded_____ or seeking funding ______

What funding agencies are you working with? _____________________________

____________________________________________________________________

What is the awarded or proposed funding dollar amount? ___________________

Approximately how many samples do you plan to run at ERTL? ______________