

Request for NMR User Training

Complete this form and return it to the NMR Facility staff (C237). You are encouraged not to start training until you plan to start using the spectrometers for research. Please call 855-6492 if you have any questions about this form or the training.

Name (please print) _____ E-mail _____

Office phone # _____ Office room # _____

Research group _____ Account # _____

Status Undergraduate student

Graduate student

Post-doctoral associate

Faculty/Staff

Prior experience using NMR spectrometers No Yes (Varian Bruker Others)

Faculty approval:

Signed _____ Date _____

For NMR Facility Staff Only

Usr name _____ User ID# _____

Temporary MagRes password _____

Date of training _____ Trainer _____ on _____

Accounts made on:

I600___ B500___ I500___ I400___ VXR400___ Sun2___ Sun5___ MAG_RES___
