

New User Form*

Penn State Research Facilities

Name of Actual User _____
First MI Last (Family) Suffix, if any

Company or Institution _____

Address _____

City State Zip

Email _____

Phone _____ **Mobile** _____

_____ **I will physically enter a lab or operate research equipment**** (optional)

Title of Project _____

I certify that I will use the Penn State User Research Facilities in a safe and responsible manner as outlined by the Facility Staff:

User Signature & Date _____

New and existing academic or industry users must be given permission by the project PI to incur charges on a project. If the new user is a student, most likely the student's faculty advisor is the project PI.

Principal Investigator Signature & Date _____

*All required fields must be completed.

**Full access to physical labs and equipment may require a for-fee PSU Access Account that will be charged to your billing account.