

BRC Service Form

Date

MM/DD/YYYY

QU student:

Under graduate
student

Post-graduate
student

QU Staff:

Academic staff

Non-academic
staff

External:

Student

Research assistant

Post-doctoral fellow

Applicant's (internal/external) Details

Name:

**Student/QU- ID
number:**

Phone Number

E-mail Address

**Department/
College :**

Institution:

Lead PI Name:

**Lead PI E-mail
address**

Service Detail:

Instrument Name :

Type of Samples

Other Service

Duration of use

if Other (please mention the duration)

From

To

MM/DD/
YYYY

5. Signatures:

BRC Technical Manager

Applicant's (s)

Principle Investigator