

Date: / /
 (month / day / year)

Application Form for Share-Use Equipment Workshop

Attention: Director of the Research Facility Center for Science and Technology

I hereby apply for the workshop on analysis instruments.

I will comply with the applicable rules.

Equipment	
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User	Affiliation	Faculty / Division, Program / College
	Job Title or Grade	
	Name	
	Unified Authentication ID (13 digits)	
	Extension No. or TEL	
	Email Address	.tsukuba.ac.jp
Supervisor (who will cover equipment usage fees)	Affiliation	Faculty / Division
	Job Title	
	Name	
	Extension No. or TEL	
	Email Address	.tsukuba.ac.jp

Number of times reissued for your ID card (most commonly "0")	times
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< Instruction on how to fill out the form >

- 1 Use an abbreviation for the year, such as D3, M2 or B4.
- 2 Use your name registered in the school register.
- 3 Provide the phone number of the laboratory (the on-campus extension number).
- 4 If you reissued your ID card because of loss, you should notify our office (mail to: chanal@un.tsukuba.ac.jp) of information on the reissue with your unified authentication ID.

*For the manager use only	講習日 平成 年 月 日	備考
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