New User Form*

Penn State Research Facilities

Name o	f Actual User				
		First	MI	Last (Family)	Suffix, if any
Compan	y or Instituti	on			
Address					
	City		State		Zip
Email					
Phone _		Mo	bile		
				search equipment**	
I certify that I will use	the Penn State Us	er Research Facilit	ies in a safe and respo	nsible manner as outlined by	the Facility Staff:
User Signature 8	& Date				
New and existing acad student, most likely th				oject PI to incur charges on a	project. If the new user is a
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.