

## Nanoscience @ UNM: User & Project Information Form

<b>Date:</b>		<b>UNM Technical Liaison Contact:</b>			
<b>New Project Title:</b> (please be short but descriptive)					
<b>First Name:</b>			<b>Last Name:</b>		
<b>Organization or Institution:</b>					
<b>Department:</b>					
<b>Mailing Address:</b> (where you receive business related mail)		<b>City:</b>	<b>State or Country:</b>		<b>Zip Code:</b>
<b>Mailing Address:</b> (where you want invoices sent, if different from above)		<b>City:</b>	<b>State or Country:</b>		<b>Zip Code:</b>
Attn:					
<b>Phone # (primary / alternate):</b> 1. 2.		<b>FAX #:</b>	<b>Email Address (primary / alternate):</b> 1. 2.		
<b>Emergency Contact Name and Phone</b> (please include relationship, e.g., friend, spouse, coworker, etc.) : (Required if personally using the lab.)					
<b>Project Principal Investigator (PI)* or Responsible Manager:</b>			<b>Email address for PI or Responsible Manager:</b>		
<b>Accounting Details for External Users</b>			<b>Accounting Details for Internal Users</b>		
Purchase Order #:			BANNER Index Code:		
or Credit Card Issuer (MC or VISA Only) :			Dept Name		
<b>Accounting contacts</b>			<b>Mailing Address</b>		
Name:			PO Box or Street:		
Email:					
Phone1:			City:		
Phone2:			State, ZIP code:		
			or Country		
<b>Personnel expected to work on this project:</b> (add additional sheets as necessary)					
<b>Name:</b>			<b>Title or Function:</b>		

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Á Á Á Á	<b>Objectives</b>
Á Á Á Á	<b>Technical approach</b>

Project Review - Signature Approval			
Reviewed by:	Signature:	Date Approved:	Description of Expertise or Job Title
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Synopsis of issues or concerns:

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2.)

3.)

4.)