

NANO FABRICATION CORE FACILITY

Usage Proposal Form

Name: _____

Date: _____

Home Phone: _____ Work Phone: _____

Email: _____

Usage Period From _____ to: _____

Company / Institution: _____

Address: _____

Advisor: _____

Account Info: _____

Microchip Fabrication Classes (Please list all courses taken)

It is necessary for clean room management to review your intended research project. Please attach an outline listing your procedure. It should include the tools and chemicals that you intend on using in the lab. This outline must be typed. This outline should be shown to your advisor and signed by him.

**Note: Please submit completed form to Bill Funk or Dan Durisin, office 3162
Ph #: 313-577-9387**

Bill Funk e-mail: bfunk@ece.eng.wayne.edu

Dan Durisin e-mail: ddurisin@ece.eng.wayne.edu

This section for clean room management.

Approved By: _____ Date: _____

No fee usage for this project

Approved By: _____ Date: _____