

REQUEST FORM FOR MS FACILITY TRAINING

1. Complete the request form for MS training and return it to the MSL staff.
You are **STRONGLY** encouraged **NOT** to start training until you plan to routinely use the spectrometer for research.
2. You must have at least one training session with MS LAB staff before you can start booking the MS.

Attach your photo or
could be taken
during training
course

Section A:

ONLY Update Personal Information Or

Please tick the training that you require			Time Cost	Training Date	Remarks
1)	LC/MS	[]	3 to 6 hours		
2)	ESI (Thermo LCQ)	[]	3 hours		
3)	ESI (Bruker Amazon)*	[]	1 hour		
4)	GCMS	[]	1 hour		
5)	MALDI	[]	1 hour		
6)	MALDI Imaging	[]	1 hour		

* Need be trained ESI (Thermo LCQ) first

Section B:

Requestor's Name: _____ Contact No.: _____

E-mail address: _____

(If you are NUS student please fill by "e???????@u.nus.edu" or NUS staff "chm*@nus.edu.sg")

Status: Student (Honours / UROPS / Master / PhD)

Staff (Research Assistant / Post-doc / Visiting Scholar) Others: _____

Passed safety test: Yes No

Please tick the time that you are available for training (Where possible, please tick more than one time)

Monday		Tuesday		Wednesday		Thursday		Friday	
Morning	Afternoon	Morning	Afternoon	Morning	Afternoon	Morning	Afternoon	Morning	Afternoon

Section C:

Supervisor Name: _____

Supervisor Signature: _____

Date of Submit: _____

For official use:

Remarks: _____