After-Hours Access Characterization Facility

University of Minnesota Users

After-hours access can be requested for Shepherd Labs and Nils Hasselmo Hall (NHH) by completing this form. After-hours access is for use of instruments out of normal business hours (8 am-4:30 pm for Shepherd Labs and 7 am-6 pm for NHH) during weekdays and anytime on weekends. This form should be returned via the drop box located outside 15 Shepherd Labs or emailed as a .pdf to charfac@umn.edu. For after-hours access to Shepherd complete this form and return; NHH requires additional steps that must be completed.

For after-hours access to NHH: (1) Complete this form. (2) Your information will be forwarded to Chris Frethem (or, as backup, Fang Zhou) in the NHH Facility. (3) Chris (or Fang) will then make a "Supervisor's Request" for you at http://hub.ahc.umn.edu/facilities/research-building-management-services/building-access. (4) You must then go to that site and complete the "Employee / Student Access Form" (5) You will receive an e-mail from AHCRBMS confirming that your application has been received, and this e-mail will provide links to the DEHS "Radiation Safety" and "Blood-Borne Pathogens" trainings, <a href="whitehatemore-w

atrium on the 3rd floor so staff can enter you completed or after-hours access will not be g	r UCard number into their system. All steps must be ranted.
Indicate which facilities you request after-ho	urs access to:
☐ Shepherd Labs	☐ Nils Hasselmo Hall
•	ne following information. UCard ID (begins with 600953) our UCard. Please make sure to write legibly:
Name:	
Student/Staff ID:	
UCard ID:	
Smart Card # <u>OR</u> Codabar (circle one):	
harm to the instruments and if anything does immediately. Instrument or equipment dama instrument down time, and repair costs. Fail	aken away at any time. Care must be taken not to cause happen, contact the specialist via phone or email age may result in charges based on specialist time, ure to notify of instrument issues occurring during aftertion. Please sign and date below to indicate you use.
Signature:	Date:

	Code Number:
Please fill in the instruments desired for after-hours use below and have the instrument specialist(s) sign in the appropriate field(s).	
1. Instrument:	
Instrument Specialist Signature:	Date:
2. Instrument:	
Instrument Specialist Signature:	Date:

4. Instrument:

Date:_____

Date:_____

3. Instrument:

Instrument Specialist Signature:

Instrument Specialist Signature:

Instrument Specialist Signature:______ Date:_____

5. Instrument:

Please note that you may use only the instruments listed above after hours; additional instrument you would like to use after-hours must be listed on this form, if it is found that you used instruments you do not have access to in after-

hours you will be charged.