

# CBS Advanced Imaging Facility user form

Please, fill in as pdf and send to [krs5@le.ac.uk](mailto:krs5@le.ac.uk).

All fields are required!

First name	
Surname	
Department	
Email address	
Phone number	
Position	
PI/supervisor of project	
PI Email	
PI Department	
Charging code for this work	
Expected duration (user account will only be valid for this period)	
Funding source	
Will the work involve	Live samples requiring containment level 1 Live samples requiring containment level 2 (submit AIF Biosafety form with user form) none of the above.
User needs access to Research File Store (R-drive) for data storage	Yes                      No

Signed (user) \_\_\_\_\_ Date \_\_\_\_\_

Signed (PI/supervisor) \_\_\_\_\_ Date \_\_\_\_\_

The Advanced Imaging Facility conforms to the General Data Protection Regulation (GDPR), personal data will only be used for AIF management purposes.

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**For office use only:**

Charge code agreed                      PhD student, bench fee: £ \_\_\_\_\_

Directly Allocated costs

Signature Departmental Financial Manager: \_\_\_\_\_ Date: \_\_\_\_\_

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Account created

Signature AIF Manager

Date: