Electron Microscope Unit: Supervisor Authorisation





| User Details: | | |
|---|--------------|--|
| User's Name: | Date: | |
| User's ZID: | School/Unit: | |
| | | |
| Costs: | | |
| I agree to meet the costs of the proposed microscopy. Payment may be made via the UNSW account quoted below or by external invoice. EMU charges are listed on the EMU website: EMU charges UNSW Mark Wainwright Analytical Centre | | |
| Acknowledgement: | | |
| I will ensure that the facilities and expertise provided by the EMU and Microscopy Australia are appropriately acknowledged in publications arising from the work done in the EMU. There is a template for acknowledgement on the EMU website: Referencing and Acknowledgement UNSW Mark Wainwright Analytical Centre | | |
| Work Health and Safety: | | |
| I can confirm that a risk assessment of the specimen(s) has been undertaken and can be provided to the EMU if requested. | | |
| I will ensure that my student/staff member informs EMU staff of any changes to their sample or project goals. This will help us to achieve the best results and to ensure that we are working safely. | | |
| I understand that samples with any biological components will require special preparation and must be discussed with EMU staff before they are brought to the EMU. | | |
| | | |
| Account Details: | | |
| Fund/Dept ID/Project: | | |
| Supervisor Details: | | |
| Name: | | |
| Signature: | | |