

Analysis Request Form MAPEX Core Facility for Materials Analytics

Requesting user / Scientific contact

Name _____
Affiliation _____
E-mail _____
Phone _____
PI _____

Requested Analysis and Sample Details

Please provide a description of the required analysis

Analysis

Please provide a description of the samples to be analyzed

Samples

Safety

Are the samples hazardous?

Yes No

If yes, list the hazardous substances:

Which safety measures need to be observed during sample preparation and handling?

Disposal / collection of samples

After analysis, the samples:

- Can be disposed in regular household waste
- Will be collected by the user

Other Information

Are the samples originating from animals or humans?

- Yes
- No

If yes, provide a declaration that the measurements will be carried out in accordance with the relevant ethical and legal requirements.

Are the requested measurements part of commercial project?

- Yes
- No

Are the requested measurements part of scientific cooperation between the MAPEX-CF application scientist(s) and the requesting user(s)?

- Yes
- No

If yes, provide a description of the cooperation agreement below.

Agreement

The intellectual property rights of the created data belong to:

- The requesting user
- The Application Scientist

Declaration on the Civil Clause

In the state of Bremen, the Civil Clause for universities is enshrined in law, the universities pursue exclusively peaceful purposes in research, teaching and studies (see §4(1) BremHG).

Accordingly, the MAPEX Core Facility, as an institution of the University of Bremen, is also required by a resolution of the Academic Senate to "reject research topics and resources that could serve armaments purposes."

I confirm that the requested measurements are in the context of civilian research projects and that the results will not be used for military purposes.

Yes No

Short description of the project

As a publicly funded institution, the MAPEX Core Facility for Materials Analytics is subject to the obligation to provide information in accordance with the Freedom of Information Act. We therefore request a brief description of the project in which the requested measurements take place.

Project

Billing Details

For internal users:

The usage costs are financed by:

Group / organizational unit _____

8 Digit Fund's number _____

Administrative contact _____

E-Mail _____

Phone _____

- I hereby confirm that the fund's number stated above has sufficient funds to cover all expenses related to the requested analysis

For external users:

Billing address _____

Administrative contact _____

E-Mail _____

Phone _____

Leitweg-ID _____

VAT number* _____

*For exemptions from VAT please provide proofs separately.

- I hereby confirm that I accept the terms and regulations of the MAPEX-CF present in the "General User rules and guidelines – MAPEX Core Facility for Materials Analytics" and the instrument-specific regulations of the individual instruments which will be used in the course of the requested analysis.
- I hereby confirm that all information filled is accurate.

Date, Place

Signature of the requesting user

To be completed by the MAPEX-CF Staff

Name _____

Date _____

Estimated expenses

Amount	Description	Costs
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Additional agreements
