

Computational Molecular Biology and Statistics Core Service Request Form

Instructions

1. Complete this form in its entirety.
2. Submit the signed, original hard copy to Maryellen Carl, CMS 5125. Send a copy to the **Computational Molecular Biology and Statistics Core**, CMS 2004.

Requestor Information

PI Name: _____

E-Mail: _____ Phone _____

Division: _____ Laboratory: _____

Payment Information

Note: If an HRI account is used, a PI signature is sufficient. If a Division or other state account is used, the Division Director's signature is also required.

HRI Account number: _____

Requestor Signature: _____ Date: _____

State Account number: _____

Division Director Signature: _____ Date: _____

Total Hours Approved _____

Project Information

1. Briefly describe the scientific goals of the project:

2. Project related to: ___ Grant application ___ Ongoing investigation,
___ Manuscript submission/revision ___ Other

3. Time and budget constraints (e.g. grant deadlines, total hours, etc.):

4. How will success be assessed?

If you have any comments on the core service please add them here: