

Application Form for Using Life Sciences Core Facilities

Fill the form, save a copy, click on Submit to send it to xin.zhao@utoronto.ca

External Users Only

Applicant Information	Applicant Full Name	Email	Mobile	
	Supervisor Full Name	Email	Mobile	
	Company Name and Address, and Website (If Applicable)			
Instruments Requested	Cell and Molecular Biology Facility Specify Cell and Tissue Culture Facility Specify Autoclave and Research Resources Facility Specify			
Estimate Period	Start Date	Finish Date		
Payment Information	I acknowledge the user fee \$30.00/Instrument/Hour.			
	Attention to: Name	Email	Mobile	
	Billing Address			
Personnel Under the Application	Full Name	Email	Mobile	Individual's Role and Years of Experience in Related Field
	Attach a sheet if there are more users.			
Materials To Be Used at Facilities	Brief Description			Biosafety Level

Date of Application