

User Registration Form of Mass Spectrometry Facility

*Department of Chemistry and Biochemistry
University of Maryland, College Park, 20742*

User Name (Please print)	Registration Date	Department
Telephone#	Email	Advisor Name
Job Title ___ Professor ___ Postdoc/Research Associate ___ Graduate Student ___ Undergraduate Student ___ Other		
Instruments that You plan to use ___ Bruker MALDI ___ JEOL AccuTOF (ESI) ___ Bruker Maxis-II (BioMS)		
Instruments, on which You already got Training ___ Bruker MALDI ___ JEOL AccuTOF (ESI) ___ Bruker Maxis-II (BioMS)		
How much Experience do You have on the following Instruments? Bruker MALDI ___ 0 hour ___ 1 to 5 hours ___ 5 to 40 hours ___ > 40 hours JEOL AccuTOF (ESI) ___ 0 hour ___ 1 to 5 hours ___ 5 to 40 hours ___ > 40 hours Bruker Maxis-II (BioMS) ___ 0 hour ___ 1 to 5 hours ___ 5 to 40 hours ___ > 40 hours		

Below is for ADVISORS only:

Which Class of User that You would like to assign the User as ___ Beginner ___ Advanced
Advisor's Name _____ Advisor's Signature _____ Date _____ .

If you have any questions or comments, please contact:

Dr. Yue Li
Building 091, Room 0507
Phone (301) 405-1871
Fax (301) 314-9121
yueli@umd.edu

Thank you very much!