

## College of Medicine Equipment Funding Request

### I. Submitted By:

<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Last Name</b>	<b>First Name</b>	<b>Academic Title</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Department</b>	<b>Email</b>	<b>Phone</b>

The following information must be provided in order for the Bioinstrumentation Subcommittee to evaluate a request for funding in the College of Medicine and forward to the Dean's Research Council. The request cannot be forwarded until adequate information is received.

### II. Purchase Proposal Outline:

#### Name and Model of Equipment Requested

#### Vendor

<b>Quoted Total Price</b> (please attach quote)	<b>Amount Requested from COM</b>	<b>Total other funding For Equipment</b>
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#### Amount Requested from other sources (Department/Center)

### III. Definition of the Service and location.

A. Will the new equipment you are purchasing be

part of an existing Shared Service?

If yes, include current name of service

If yes, include name of administrating unit (Center, Dept, ARL etc)

to create a new Shared Service?

If yes, include proposed name of service and administrating unit

B. Where will the equipment be located?

Room number:  Building number:

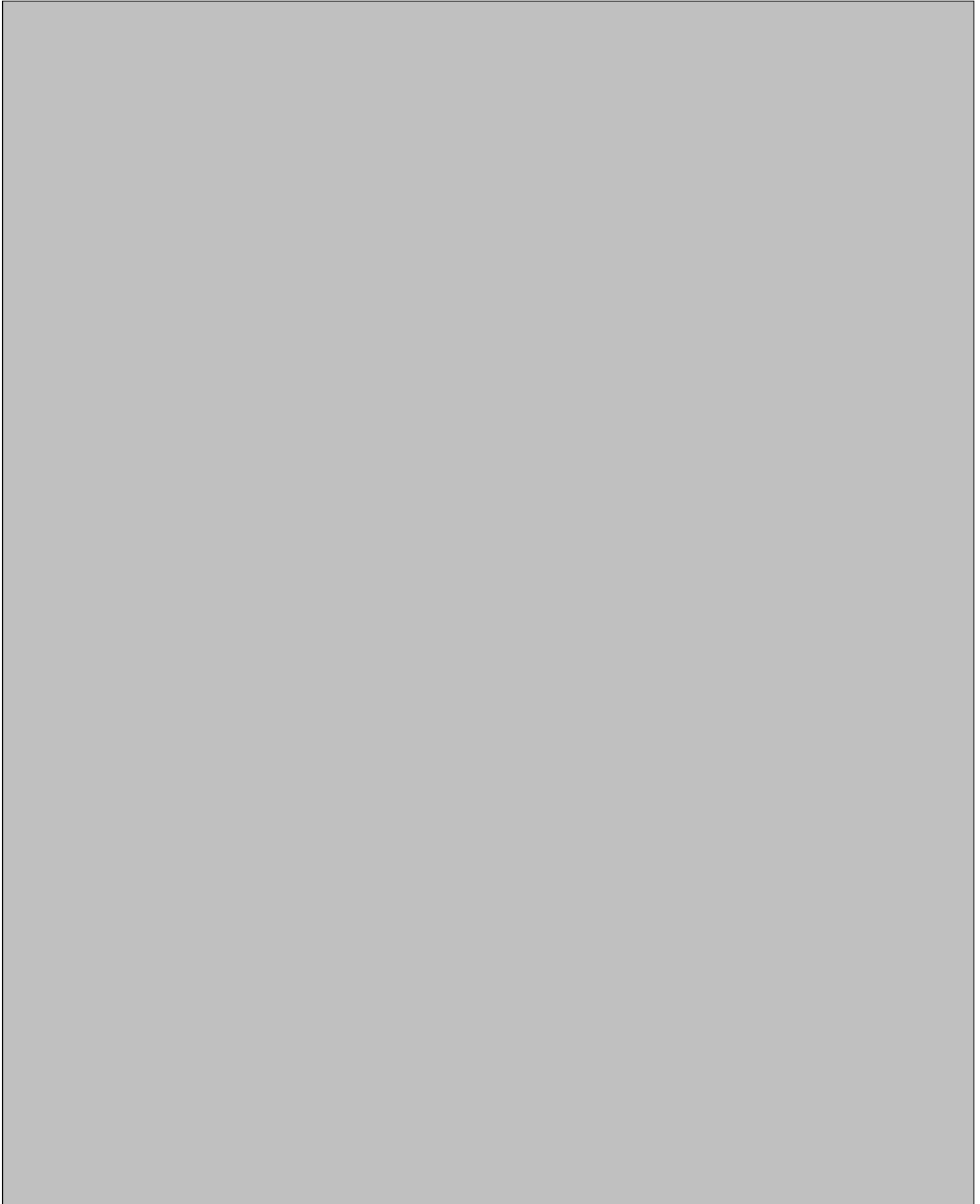
C. What department, center or unit is allocating the space indicated? Please provide a letter of support from the department head, center or unit director.

**IV. Definition of Function.** What are the unique contributions that the equipment will provide to the research community? Provide a statement of the specific aims for the use of the equipment. List all equipment that is part of the Shared Service.

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**V. Grants using Equipment.** List grant support from faculty using the service that will require or have used the new/upgraded equipment.

Include the following information: FRS#, Grant/Contract #, Indirect cost rate, PI on grant, Title of grant, Full funding period, Funding period covering this equipment usage, Total funding, Direct costs, Indirect costs.



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### VI. Additional required information.

A. How will the equipment be advertised?

B. Who will be responsible for day to day oversight and operation?

C. Will training be provided? If so, who will be responsible?

D. What are the criteria for user accessibility?

E. Who will be responsible for setting the criteria for accessibility?

F. What technical services will be provided?

G. What is the user fee structure and what are the operating and maintenance costs?

H. Who will handle the accounting?