

Application Form for VariMAX Measurement

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|---------------------|-------------|--------------|---------------------|----------------|-----|
| Name | | Use Due Date | | Submitted Date | No. |
| Name of Lab. | Dept. | | Lab. (Instructor:) | | |
| Contact Information | Extension : | | E-Mail : | | |

- **Fill in a necessary matter in the bold frame line.**
- Please add “Application for person use” under the title, in the case of your own measurement.
- Use time is until 12:00 of the next day at 12:00. (Any sample is very OK.)
- You cannot make next reservation until one reservation is over.
- When you understand that it takes measurement more than 24 hours beforehand, please fill in the necessary days. Only when it takes it with 1 sample more than 24 hours, it is possible to continue it more than 12:00 of the next day. (Prior consultation is necessary.)
- When you make a reservation, please submit the application form after you confirm there is no reservation on the use due date.
(Please contact by the below e-mail address about the usage of the calendar.)
- When you cancel it, you should e-mail to the follow address..
- If you reserve again after you cancelled once, you must submit the application form again.
- After VariMAX use, please fill in a matter necessary for the use list.

Reference ; uketsuke_varimax@ocarina.osaka-cu.ac.jp

The following is entry-free..

| Acceptance Number | Name | Department, Graduate Course | Name of Lab. | Name of Instructor | Contact Information |
|-------------------|------|-----------------------------|--------------|--------------------|---------------------|
| | | | | | |

| Check Date of the Crystal | Accepted Date | Use Date | <u>Resources for Payment</u> | Person in Charge |
|---------------------------|---------------|----------|--|------------------|
| | | | <input type="radio"/> Budget from the University <input type="radio"/> Other Fund | |
| | | ~ | | Seal |