



Education and Training Program Project Collaboration Request Form

Arizona Research Laboratories
Division of Biotechnology

Business Office
Gould - Simpson 1013
Tucson, Arizona 85721
Phone (602) 621-4064
Fax (602) 621-1364

Section A. User Information

Name: _____ P.I. (if different): _____
Department: _____ Address: _____
Phone: _____ Fax: _____
Email: _____ P.I. Email: _____

Section B. Project Information

Please give a description and the scope of the project that we will assist on as **an attached document**.

Section C. Billing Information

In general, we provide one hour of free consultation and/or services per lab project. Additional staff labor hours are billable at **\$35/hour FY2005/2006. Information for the payroll representative:** Please double check the account number that will be billed. When we process payroll, ARL will write the hours and account on the roster to pay for the services rendered. For additional information, please contact our payroll rep. at 621-4064.

FRS#: _____ Expires: _____
Payroll Rep: _____ Signature: _____
Department: _____ Address: _____
Phone: _____ Email: _____
Fax: _____ Date: _____

Section D. Consumables and Additional Resources

Consumables will be provided by the P.I.'s laboratory. Any purchases and Biotechnology fee per use service charges shall be the responsibility of the P.I. and processed through P.I.'s home department.

Section E. Publishing Data

If any techniques developed by our staff result in a publication, please acknowledge our facilities appropriately.

If using BCF software, the BCF User Agreement specifies that any reports or published results obtained with BCF Software (Custom Services) will acknowledge its use by the appropriate citation as follows:

"The {name of software} was developed by the Biotechnology Computing Facility (BCF), Arizona Research Laboratories - Division of Biotechnology, at The University of Arizona, Tucson, AZ"

Any publication which has utilized BCF shall include the following reference: {name of software}; {title of project}, {names of authors}, {pub info if published}

3rd Party Software (licensed to BCF): Please appropriately acknowledge any software that you use for your analysis as required by the licensing agreements. This information can be found in the "ReadMe" document or "license" document of the individual software packages.

Electronic documents shall include a direct link to the official BCF page:
<http://bcf.arl.arizona.edu/>

To help us justify upgrading support equipment on equipment grant applications and upgrading our services, please send us a copy of your published articles for our files. It would be appreciated if our resources are mentioned in the acknowledgment section

Section F. Signatures

User Signature: _____ Date: _____

P.I.'s Signature: _____ Date: _____

RETURN THIS FORM TO Bob Quiroz @ GS1013, Phone- 621-4065

-----BCF USE-----

Date Received: _____ Projected Completion Date: _____

Comments:

