



qPCR CORE
Annenberg Building
Room 14-72, Box 1137
One Gustave L. Levy Place
New York, NY 10029

Phone: 212- 241-6413
Fax: 212- 289-4107

USER AUTHORIZATION

Principal Investigator's Name: _____

Department: _____ Phone: _____

Box Number: _____ Email: _____

Fund Number: _____ Date of Expiration: _____

PI Signature: _____ Date: _____

Persons authorized to use the facility:	Phone number:	Email ID:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
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_____	_____	_____

Please return the completed form to: Annenberg 14-72 or Box 1137