## **NCTC Science Lab Request**

(Revised 09/21)

## Send completed form to Scheduling and Events Management (SEM) by email to: nctc sem@fws.gov

The following information is required to allow us to meet your training needs. Once your request has been approved, SEM will contact you with a confirmation. Additionally, you will be contacted by the Lab Technician to discuss your lab needs in detail, to include any questions you may have about the specific labs, floor plans, equipment, and supplies.

Course or Even	t Title:					
Dates:	to					
Organization:						
Name of Contac	ct:					
Telephone:						
Email:						
Laboratory Space - Requested Dates:				Lab Ap	Lab Approval:	
to	Aquatic Resources Lab (Rm G21L) (Staging Only)					
to	Aquatic F	Aquatic Resources Lab (Rm G21L)				
to	Biology I	Biology Lab (Rm. 217L, fixed stations)				
to	Biology I	Biology Lab (Rm. 218L, movable stations)				
Number of Stu Will you be us	udents: ing live animals:	Yes No				
If yes, what species?						
Will you be using specimens from one or more of the Science Lab Collections:						
Check all that apply below:						
Fish	Mussels	Macroinvertibrates	Birds	Crayfish	Herbarium	
Will you be using chemicals/animals preserves in chemicals? If yes, which chemicals?						

Describe specific lab set-up requirements:

Please fill out a **Science Lab Equipment and Supply Request Form** for all equipment/supplies required for your course.

Lab Staff Use Only: Dates for Set-up: Dates for Break-down: