	<b>Light Microscopy Unit (LMU)</b> Tel: 6042/6012	<i>just for application at the EMU</i> Projektnummer: _____ <input type="checkbox"/> assisted <input type="checkbox"/> non-assisted User Account: _____ <i>(will be specified by EMU)</i>
	<b>Electron Microscopy Unit (EMU)</b> Tel: 4387/6079	
	<a href="mailto:imces-support@uk-essen.de">imces-support@uk-essen.de</a>	

### **Application form for the use of IMCES instruments (internal UKE/UDE users)**

Please fill-in digitally and send the signed and scanned version of it via email.


Further information concerning instrumentation and registration can be found at <http://imces.uk-essen.de>

<b>Applicant details</b> (the person who uses the IMCES service, i.e. a) uses the instruments, b) is responsible for delivered samples, c) appears for assisted image acquisition,...)			
<b>Gender:</b>	<input type="checkbox"/> male	<input type="checkbox"/> female	<b>Date of birth:</b>
<b>Title:</b>	<input type="checkbox"/> Dr.	<input type="checkbox"/> PD	<input type="checkbox"/> Prof.
<b>Surname:</b>			
<b>Forename:</b>			
<input type="checkbox"/> Universitätsklinikum Essen <input type="checkbox"/> Universität Duisburg-Essen <input type="checkbox"/> other			
<b>Institute/Clinic:</b>			
<b>Department:</b>			
<b>Room:</b>			
<b>Phone number:</b>			
<b>Email:</b>			

<b>PI Details</b> (the person who pays for use of the IMCES service) <input type="checkbox"/> same as above			
<b>Gender:</b>	<input type="checkbox"/> male	<input type="checkbox"/> female	<b>Date of birth:</b>
<b>Title:</b>	<input type="checkbox"/> Dr.	<input type="checkbox"/> PD	<input type="checkbox"/> Prof.
<b>Surname:</b>			
<b>Forename:</b>			
<input type="checkbox"/> Universitätsklinikum Essen <input type="checkbox"/> Universität Duisburg-Essen <input type="checkbox"/> other			
<b>Institute/Clinic:</b>			
<b>Department:</b>			
<b>Room:</b>			
<b>Phone number:</b>			
<b>Email:</b>			

<b>Associated people</b> (name + contact details)  Pls. note that all people that actively make use of IMCES services have to fill out an individual project application form!	
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 <b>IMCES</b>	<b>Light Microscopy Unit (LMU)</b> Tel: 6042/6012	<i>just for application at the EMU</i> Projektnummer: _____
	<b>Electron Microscopy Unit (EMU)</b> Tel: 4387/6079	<input type="checkbox"/> assisted <input type="checkbox"/> non-assisted
	<a href="mailto:imces-support@uk-essen.de">imces-support@uk-essen.de</a>	User Account: _____ <i>(will be specified by EMU)</i>

## Details for usage of Light Microscopy Unit (LMU)

Please indicate which instrument you would like training for.

*(If unsure please leave blank until after consultation.)*

**Leica TCS SP8 (MFZ room 3.031):**

- WLL Confocal                       gSTED                       FLIM

**Zeiss ELYRA PS.1 (MFZ room 3.032):**

- PAL-M/STORM/TIRF                       SIM                       LSM 710 confocal

- Zeiss AxioObserver and Apotome live cell system (MFZ room 3.032)

- AMD EVOS fl Digital microscope (MFZ room 3.029)

- BD FACS Aria III cell sorter (MFZ room 3.029)

- Olympus BX51 upright (MFZ room 3.034)

- LaVision Biotech Ultramicroscope whole mount (MFZ room 3.034)

- Visualsonics Vevo 2100 ultrasound (MFZ room 3.034)

- Caliper IVIS Lumina II, luminescence/fluorescence (MFZ room 3.034)

**Leica TCS SP8 (Campus UDE - room S05 V01 E67):**


- Multi-Photon (MP)                       MP-FLIM

## Details for usage of Electron Microscopy Unit (EMU)

Please indicate which EM methods will be project-relevant.

*(If unsure please leave blank until after consultation.)*

- TEM                       SEM                       CLEM  
 Cryo TEM                       Cryo SEM  
 TEM Tomography                       FIB/SEM

	<b>Light Microscopy Unit (LMU)</b> Tel: 6042/6012	<i>just for application at the EMU</i> Projektnummer: _____
	<b>Electron Microscopy Unit (EMU)</b> Tel: 4387/6079	<input type="checkbox"/> assisted <input type="checkbox"/> non-assisted
	<a href="mailto:imces-support@uk-essen.de">imces-support@uk-essen.de</a>	User Account: _____ <i>(will be specified by EMU)</i>

### Chemical and biological safety:

Use of chemical or biological hazardous material?       **yes**       **no**

If yes what: \_\_\_\_\_

The biological samples belong to the risk group:       **no risk**       **L1/S1**       **L2/S2**

*Remark: Aldehyde fixed EM samples belong to the group "no risk"!*

If S1 or S2 is chosen, you have the following permission:

„Registrierungsnummer“: \_\_\_\_\_

„Anlagennummer“: \_\_\_\_\_

„Aktenzeichen“ (just S2 work): \_\_\_\_\_

Full project name: \_\_\_\_\_

„Projektleiter“ accord. to GenTSV: \_\_\_\_\_

### “Projektleiter” declaration

I have noticed and agree that the above-mentioned S1/2 work will be executed in the S2 laboratories of the IMCES.

\_\_\_\_\_ , \_\_\_\_\_  
 Place                                  Date                                  Signature of “Projektleiter”


If you do not have a registration number for S1 or S2 filled in, but crossed S1 or S2 above you cannot start working in the IMCES. All live cell work with organisms is minimum L1/S1. No work with a safety level higher than L2/S2 is possible. If you wish to work at L2/S2 level an extension of Your official L2/S2 approval from the local authorities will first be need to include the appropriate IMCES' rooms. Please contact us for details and keep in mind that this process will take some time!

### Mouse work

Will Your activities at the IMCES include active mouse work?       **yes**       **no**

If yes please download and fill out the IMCES/ZTL application form for mouse work:

<http://imces.uk-essen.de/en/home/imces-usage-guide-look-here-first/>

	<b>Light Microscopy Unit (LMU)</b> Tel: 6042/6012	<i>just for application at the EMU</i> Projektnummer: _____ <input type="checkbox"/> assisted <input type="checkbox"/> non-assisted
	<b>Electron Microscopy Unit (EMU)</b> Tel: 4387/6079	User Account: _____ <i>(will be specified by EMU)</i>
	<a href="mailto:imces-support@uk-essen.de">imces-support@uk-essen.de</a>	

**User declaration:**

I declare I have read and will comply with the IMCES conditions and usage rules: <http://imces.uk-essen.de/en/home/imces-usage-guide-look-here-first/user-information-and-regulations/>

Further, I am aware that the IMCES is not liable for the routine data or sample storage, which is generally offered by the LMU (just data) and the EMU (data and samples). I have to take care of an immediate data transfer from the IMCES computers/servers to an own, safe file destination. During routine cleaning processes, the IMCES might delete any data from any computer/server, **older than 2 months** and even for this period, the IMCES cannot guarantee for an ultimate data safety.

\_\_\_\_\_, \_\_\_\_\_

Place, Date

\_\_\_\_\_

Signature of applicant

**Group leader declaration:**

I have viewed and agree to the IMCES fees for training and instrument use: <http://imces.uk-essen.de/en/home/prices/>

„Haushalts-Kostenstelle“ (mandatory)\*\*: \_\_\_\_\_

„Drittmittel-Kostenstelle“ (optional)\*\*: \_\_\_\_\_

Run-time of third-party funding: \_\_\_\_\_

\_\_\_\_\_, \_\_\_\_\_

Place, Date

\_\_\_\_\_

Signature of Director or group leader

\*\* Please note a **Haushalts-Kostenstelle** is **mandatory** for reference purposes. An alternative **Kostenstelle** (such as **Drittmittel**) can also be included **for billing** purposes.