**Request for Access – External Researcher**

**Dana-Farber Cancer Institute**

**You have been identified as an External Researcher that will utilize Dana-Farber Core Facilities. To gain access to the facility:**

* Please complete the form below;
* Attach a photo of the front and back of your current Institution ID badge;
➢ Attach a recent headshot or your ID badge photo; ➢ Acknowledge the DFCI Fire Response Plan.

 **Email the completed form and photos requested above to your DFCI Sponsoring Manager and DFCI General Services at General\_Services@dfci.harvard.edu. You will be notified when your access request has been approved.**

**External Researcher Information**

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| --- | --- |
| **First Name**  |  |
| **Middle Initial**  |  |
| **Last Name**  |  |
| **Job Title**  |  |
| **Department**  |  |
| **Affiliation/Institution**  |  |
| **Email Address**  |  |
| **Cell Phone Number**  |  |
| **DFCI Host/Sponsoring Department**  |  Flow Cytometry |
| **DFCI Host/Sponsoring Manager**  | Suzan Lazo |
| **DFCI Fire Response Plan**  |  I have read and understand the DFCI Fire Response Plan. **Initial**: \_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  **By submitting this form as the External Researcher above, you understand that you are responsible for and attest to:** * Having read and understood the DFCI Fire Response Plan
* Wearing your Institution ID badge at all times on DFCI premises

  **Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |

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| **By submitting this form as the DFCI Host/Sponsoring Manager above, you:**  • Approve access for the External Researcher above to DFCI Core Facilities.   **Signature**: \_\_Suzan Lazo\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_July 2, 2018\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

 Request for Access – External Researcher, June 2018