

CRL Molecular Imaging Center

User Registration Form

Name: email:
Lab/P.I.: phone:
Dept.: Location:

I am:
 Faculty Postdoc Grad. Student Staff Other

I am planning to do (check as many as apply):

confocal multi-photon transmitted or reflected
 ratio FRET FRAP FLIM/TCSPC
 time-lapse live-cell imaging Other (state in project description)

Project Start Date (mo/year): Project Duration:

Specimen: Live Fixed

Mounting:

Dyes (include ex/em maxima):

Project Description (Please briefly state your goals with respect to imaging.)

Special Equipment Needed:

Experience with microscopy/confocal:

Fill out entire form and return it to: Holly Aaron, c/o CRL, 447 LSA via campus mail, or hollya@berkeley.edu or bring it to 251 LSA, or FAX to 510.642.5741.