

# NRES Project Space Request Form

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**This section to be completed by project advisor**

Student Name \_\_\_\_\_

Student Major \_\_\_\_\_ Advisor's Name \_\_\_\_\_

Desired Space: \_\_\_\_\_

\_\_\_\_\_

This student is authorized to access NRES lab space for the purposes of their project pending satisfactory completion of the project-specific Standard Operating Procedure (SOP), as well as required training and forms.

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
(anticipated)

Note: The assignment of a specific space is determined by the nature of the project as well as the availability of the space.

**This section to be completed by student**

I understand and will comply with all lab safety and work rules. I understand that failure to comply will result in a loss of access privileges.

Student Signature: \_\_\_\_\_

Date \_\_\_\_\_

Email \_\_\_\_\_@calpoly.edu

Phone \_\_\_\_\_

**Submit this form to NRES Technical Staff**