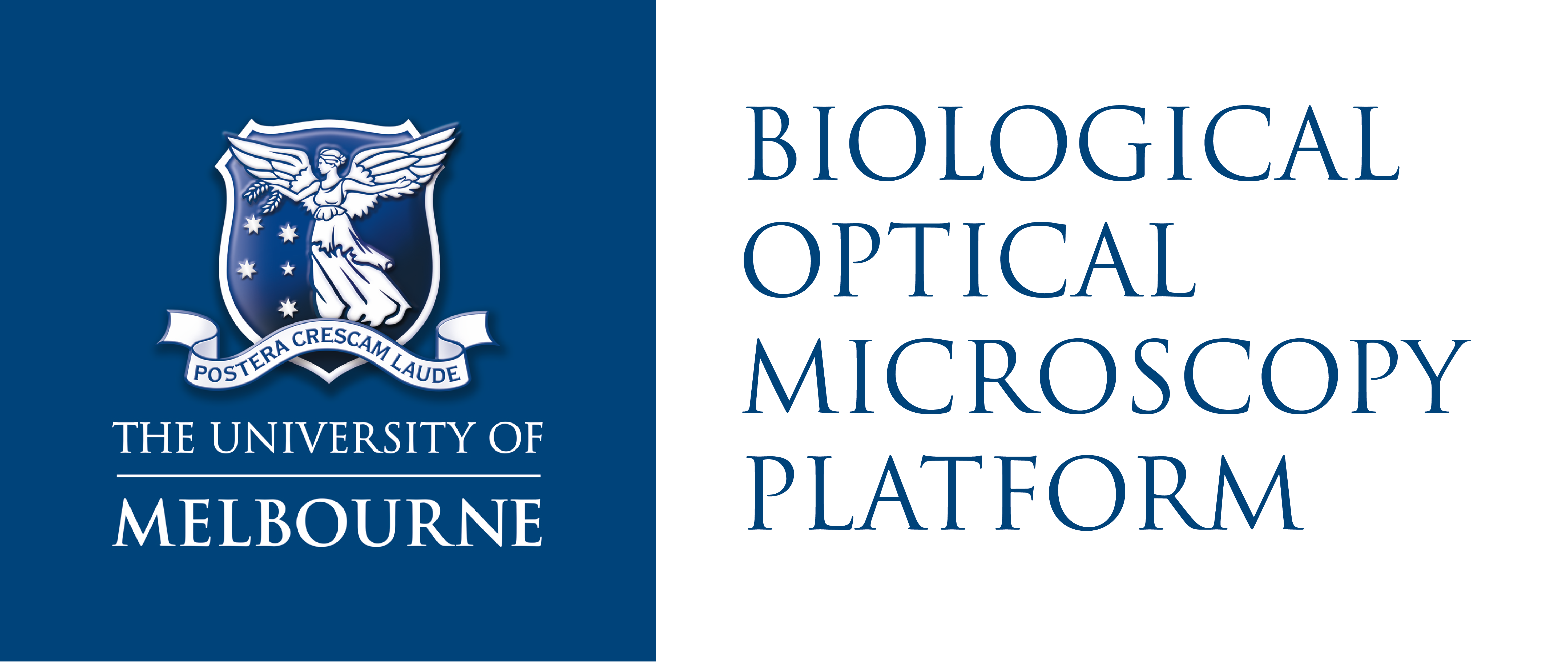
**USER AGREEMENT FORM**

**DEPARTMENT OF BIOCHEMISTRY & MOLECULAR BIOLOGY**

**TERMS & CONDITIONS:** Please read the below terms and conditions and complete the relevant user agreement form at the back of this document.

**Instrument Training**

1. Only platform staff are to train researchers to use BOMP instruments
2. Researchers will be provided with training documentation and are required to complete an online competency assessment before they can book in a face-to-face training session
3. Face-to-Face training usually consists of a two-hour induction. Platform staff retain the right to require researchers to undergo further training if deemed necessary.

**Equipment Usage and After Hours Usage**

1. Each node has its own local rules regarding access and after hours use. Please refer to the training files provided.
2. Researchers are to abide to local EHS rules at all times. Please consult the relevant training files, SOP & RA.
3. Approval for facility use will be withdrawn in the event of serious neglect or damage of equipment, inappropriate use of equipment, neglect of EHS procedures, or allowing unauthorised persons access to the Unit.
4. Any damage to a microscope resulting from misuse or operator error will be charged back to the research group to which the researcher belongs
5. Access cards must never be handed on to a third party.

**Data Management Policy**

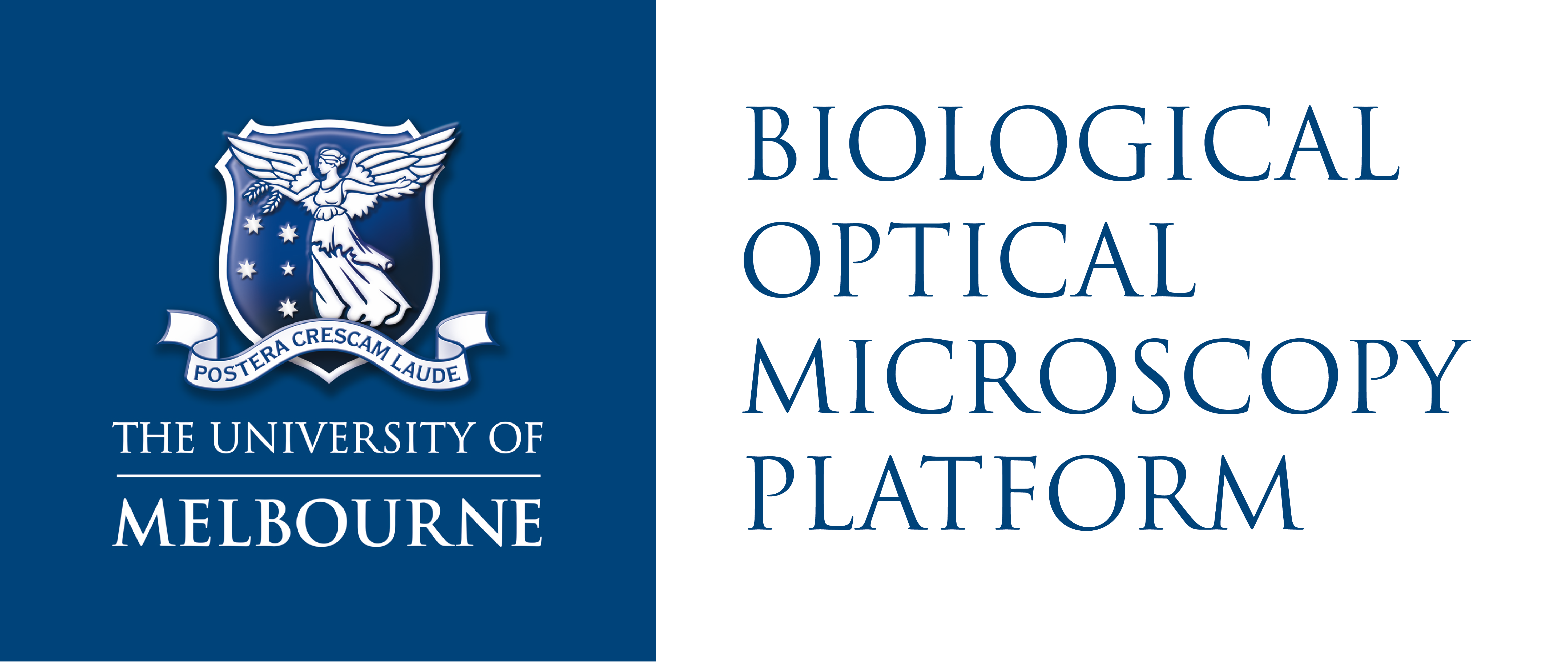
1. Images and data obtained on BOMP instruments remain the property of the researcher who acquired the data.
2. The researcher is responsible for the archiving of these files. We suggest that this is performed immediately at the end of your session. Please allocate time for this within your booking.
3. Under no circumstances are Unit staff responsible for any lost data.

**Publication/Authorship Policy**

1. The platform should be acknowledged in any research output (e.g. publication, presentation & poster) that arises from data generated on BOMP instruments.
2. Assisted use sessions are performed on a collaborative basis. Any publications that include data produced via assisted use sessions should include the relevant platform staff as a co-author.
3. Platform staff should be considered for co-authorship if they have contributed significant technical, scientific or intellectual input to a study.
4. Researchers MUST notify the platform of any research output (e.g. publications, presentations & posters) that arise from use of BOMP instruments

**Facility Staff**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Role | Name | Email | Mobile | Phone |
| Manager | **Dr. Paul McMillan** | **mpj@unimelb.edu.au** | **0400 975 760** | **9035 3021** |
| Applications Specialist | **Dr. Ellie Cho** | **hcho@unimelb.edu.au** | **0421 730 710** | **9035 5811** |
| Support Officer | **Dr. Gabriela Segal** | **segalg@unimelb.edu.au** | **0402 476 551** | **8344 6413** |
| General Enquiries | **bomp-enquiries@unimelb.edu.au** | | | **9035 3021** |

**USER AGREEMENT FORM**

**DEPARTMENT OF BIOCHEMISTRY & MOLECULAR BIOLOGY**

I/We understand that charges will be incurred for the use of the Deltavision Microscope (DV Elite) at the Department of Biochemistry & Molecular Biology, The University of Melbourne. These charges are shown below (Correct as of 1st January 2018):

|  |  |
| --- | --- |
| **Grouping** | **Cost ($/hr)** |
| Tilley lab (Biochemistry & Molecular Biology) | **0** |
| Others users (Biochemistry & Molecular Biology) | **5** |
| External (Other Depts/Universities/Institutes) | **20** |

I/We agree to settle all accounts promptly and to abide by the notes provided during training on the correct use of the confocal microscope.

|  |  |  |  |  |  |  |  |  |
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| **Lab Head (please print)** |  | | | | | | | |
| **Email & Phone number** |  | | | | | | | |
| **Department** |  | | | | | | | |
| **Designated Themis code** | **COM** | **BUD** | **CC** | **ACC** | **PRJ** | **LPC** | **ACT** | **LOC** |
| 01 | xxxx | xx | 7236 | xxxxxx | xxx | xx | xx |
| **Invoice address (Non-UoM)** |  | | | | | | | |
| **Lab head signature** |  | | | | | | | |
| **Date** |  | | | | | | | |

Personnel authorized under this agreement

|  |  |  |
| --- | --- | --- |
| **Name** | **Email** | **Phone** |
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