

Sample Submission Form – Other Requests

Investigator Information:

Date for Submission:								
PI Name:								
University:			College:			Department:		
CoBRE Investigator (If yes, please select an option below.)								
Pilot Project Leader			Project Leader		Mentor		Core Director	
OCRID Center Investigator								
Non-CoBRE/OCRID Investigator								
Researcher 1 Name:			Researcher 2 Name:			Researcher 3 Name:		
Student Post-doc Other			Student Post-doc Other			Student Post-doc Other		
Date Services Needed By:								

Experiment Information – Please provide a brief description of the services you are requesting.

Please send this completed form to Dr. Lin Liu at lin.liu@okstate.edu.