## Concordia University PERFORM Centre

Primary Investigator	(P.I.)		
Full name:	Last name		
Concordia Netname:		Email address:	
Phone:		Internal address:	
Account code(s):			e. Grant or Organization codes you will harge activities to.)
Accounts needed: (Check all that apply)	☑ Facility Booking	🗹 Personal File Storage	Group Share
	U Wellness Trainer	Cardio Memory	Cardio Pulmonary Suite
	□ Imaging Suite		□ Mass Spectrometer
	□ Perturbation Table	□ NeuroCom	
	EEG / Brain Analyser	□	D
Research Assistant I	(if applicable)		
Full name:	Last name	First name	MI
Concordia Netname:		Email address:	
Phone:		Internal address:	

Accounts needed:	□ Facility Booking	Personal File Storage	Group Share
(Check all that apply)	U Wellness Trainer	Cardio Memory	Cardio Pulmonary Suite
	□ Imaging Suite		□ Mass Spectrometer
	□ Perturbation Table	□ NeuroCom	
	EEG / Brain Analyser	□	□

Date

Internal use

Research Assistant 2			
Full name:	Last name		
Concordia Netname:		Email address:	
Phone:		Internal address:	
Accounts needed: (Check all that apply, or	□ Facility Booking	Personal File Storage	Group Share
write in 'Other' systems in the provided space)	U Wellness Trainer	Cardio Memory	Cardio Pulmonary Suite
	□ Imaging Suite		□ Mass Spectrometer
	Perturbation Table	□ NeuroCom	
	EEG / Brain Analyser	□	□
Research Assistant 3			

Full name:	Last name		
Concordia Netname: Phone:		Email address:	
Accounts needed: (Check all that apply)	Facility Booking Wellness Trainer	<ul> <li>Personal File Storage</li> <li>Cardio Memory</li> </ul>	□ Group Share □ Cardio Pulmonary Suite
	□ Imaging Suite		□ Cardio Fulmonary Suite
	□ Perturbation Table	□ NeuroCom	
	EEG / Brain Analyser	□	□

Research Assistant 4			
Full name:	Last name		
Concordia Netname:		Email address:	
Phone:		Internal address:	
Accounts needed: (Check all that apply)	□ Facility Booking	Personal File Storage	Group Share
	U Wellness Trainer	Cardio Memory	Cardio Pulmonary Suite
	□ Imaging Suite		□ Mass Spectrometer
	Perturbation Table	□ NeuroCom	
	EEG / Brain Analyser	□	□