

MTSU Interdisciplinary Microanalysis and Imaging Center  
External Project Information Sheet

MIMIC

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1. Name \_\_\_\_\_ Date \_\_\_\_\_

2. Project Title \_\_\_\_\_

3. Brief Description

4. Attach literature references to recommended technique or sample prep, if known.

5. Estimated project timeframe and hours/week \_\_\_\_\_

6. Fees \_\_\_\_\_

\*\*\* Budget Restrictions (optional) Not to exceed: \$ \_\_\_\_\_

I certify that I am responsible for charges for MIMIC services.

\_\_\_\_\_ Date \_\_\_\_\_  
Authorized Signature

Billing Address \_\_\_\_\_

\_\_\_\_\_

7. Attach a substitute W-9 form.

8. Attach a signed contract.