

## Environmental Research Complex, Cairns BOOKING FORM

Name:	Supervisor:
College / Division:	Account Code:
Phone:	Email:
ERC Induction completed: Y / N	Key required: Y / N
Area required:	<div>Gate / Shed</div> <div>Shadehouse</div> <div>Gravel space (..... sqm)</div> <div>CO2 Glasshouse</div> <div>Flight Cage (<u>half</u> or <u>full</u> flight cage)</div> <div>Research Plot</div>
Experiment Title:	Details of your Experiment:
Risk Assessment required: Y / N	Risk Assessment Number:
Expected Duration of Experiment:	<div>Start date      ...../...../.....</div> <div>End date        ...../...../.....</div>
Plant and or Pathogen name (Scientific and common):	
Area required, Number of Plants, Pots Size, etc.	
Summary of experimental aims:	
Details of treatments to be applied (chemicals/fertilisers/inoculation with pathogens etc.)	
Other information/comment:	

Applicant signature: \_\_\_\_\_

Date: \_\_\_\_\_

Supervisor signature: \_\_\_\_\_

Date: \_\_\_\_\_

Email completed ERC Booking From to **erc@jcu.edu.au**

\* ERC Site Induction required before entering the ERC

RI Office use:

Approved by:	Key Issue Date:	Key Number:
Returned to:	Key Return Date:	Signed: