This template is for your convenience in developing a strong and compelling application. To be considered for funding, submit your request here: <https://www.med.unc.edu/corefacilities/cfac-equipment-request/>

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| --- |
| Date: |
| Requested By (name and department): |
| Core Name: |
| Contact information: |
| Equipment requested (name, model #, brief description, attach quote): |
| Approximate total cost of equipment and amount requested from CFAC: |
| List financial contributions from other units: |
| Please provide the amount of indirect (F&A dollars- from external or corporate customers) currently available to re-invest in your core: |
| Describe the capabilities of the new equipment (500-word limit): |
| Discuss the customer base and list any cancer center members (if applicable) who would benefit: |
| Intended location of equipment (will the space require renovations, and if so, who will pay?): |
| How quickly can the equipment be delivered and installed? |
| Will the equipment require additional support personnel? |
| Will the equipment require service contracts? If so, what is the estimated annual cost and how will it be covered? |
| What similar pieces of equipment are already on campus and why aren’t they sufficient? Searchable database can be found at: <https://www.med.unc.edu/corefacilities/searchable-db-non/> |
| Please attach multiple Letters of Support from user base that detail benefits to customers, impact on existing or future research program, and/or unique capabilities |

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