共享大型仪器设备基本信息表

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| 学部、学院名称（加盖公章）： | | | | | | | | | | |
| **设备编号** |  | | | | | | | | | |
| **设备名称** |  | | | | | | | | | |
| **型号规格** |  | | | | | | | | | |
| **设备所在实验室** |  | | | | | | | | | |
| **存放地点** |  | | | | | | | | | |
| **相关人员信息** |  | | **姓名** | **职工号** | | **联系电话** | | **邮箱** | | |
| **设备负责人** | |  |  | |  | |  | | |
| **主要技术指标** |  | | | | | | | | | |
| **主要功能** |  | | | | | | | | | |
| **设备（相关）**  **认证情况** |  | | | | | | | | | |
| **开放机时安排**  **（对外开放时间）** | 若有特殊的开放对象或开放时间，请在此说明，若存在只接受预约或者预约及送样均可以等要求也请说明 | | | | | | | | | |
| **参考收费标准** | **实验项目** | **收费单位** | | | **学部、学院内** | | **校内** | | **社会服务** | |
| 例：\*\* | 样 | | | 30 | | 50 | | 200 | |
| \* | 小时 | | | 100 | | 100 | | 400 | |
|  |  | | |  | |  | |  | |
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|  |  | | |  | |  | |  | |
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| **其他收费要求：**  若有特殊的收费对象或者收费要求，请在此说明 | | | | | | | | |

**主管领导签字：**