The Aesthetic Technologies Lab
Lab Facilities Form

Name: ____________________________

Degree Program: ____________________

Please circle one or more categories & technologies that correspond with your general activities within the @Lab. Attached are smaller corresponding representations of these same categories & technologies. To the best of your abilities, please keep up to date records of your general activities.

What category will you be working under?

- Computer Science
- Dance
- Engineering
- Film
- Music
- Painting
- Photography
- Print Media
- Research
- Sculpture
- Theater
- Other

What technologies will you be utilizing?

- Audio
- Computing
- Motion Capture
- Portable
- Projection
- Printing
- Touch Sensitive
- Video
- Wireless
- Other
The Aesthetic Technologies Lab
Lab Facilities Form

DLN or PID: ________________________
Telephone: ________________________
Email: ____________________________

Declaration of Responsibility

I agree to the safekeeping of all items within the @Lab and external locations pertaining to @Lab functions. I also acknowledge FULL responsibility of @Lab equipment, INCLUDING full replacement of if lost or damaged.

Please note:

Equipment MUST NOT be left unattended in an unlocked environment. Replacement of lost or damaged equipment may result in a HOLD placed on Student Records UNTIL the expedition process begins. Personal effects ARE NOT the responsibility of the @Lab.

Lab Participant Signature: ________________________