CENTER FOR LIFE IN EXTREME ENVIRONMENTS

SPACE REQUEST FORM

Please download and fill out the following form. Send it, along with a current copy of your CV to the CLEE Director (Amie Romney, extreme@pdx.edu).

Last Name **Middle Initial** **First Name**

Current Position, Rank, Department

Street Address **City** **State** **Zip Code**

Phone **Email**

LinkedIn/Research Website/etc.

Please provide the following information:

I. Your Current Lab Location and Existing Square Footage of Research Space:

II. Total awarded grant dollars related to the research conducted in this research space in the next 12 months:

III. Number of graduate students currently associated with this research:

IV. Number of undergraduate students currently associated with this research:

V. The number of *graduated* undergraduate and graduate students from your research group in the last 5 years.

VI. Location and square footage of requested additional space:

VII. Please provide a 1-page statement describing the impact of additional laboratory space as it relates to:
   A. Research Progress
   B. Funding
   C. Student Training
   D. Career Advancement
   E. Mission and Vision of CLEE