GREENHOUSE/GROWTH CHAMBER SPACE REQUEST

* Is this request for Greenhouse Space or a Growth Chamber?

* Experiment start date:
* Estimated experiment end date:
* User name, email & phone number:
* PI name, email & phone number:
* Chartstring to be charged:
* Growing conditions required:
  + High temp:
  + Low temp:
  + Day length (hours):
* Bench space requested (3’x8’ bench minimum):
  + Number of 3’x8’ benches desired:
* Transgenic, wild-type, inoculated:
* Genus and species of plant:
* Special conditions, if any:

Please complete form and email to gail.shadle@unt.edu.