

## Kao ICS Equipment Training Session Request

Please fill out this form if you require a training session on the equipment you are requesting for your workshop or group work.

### Organization Contact

Organization Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Contact Email: \_\_\_\_\_

### Kao ICS Time Request

Number of attendees: \_\_\_\_\_

Date of request (MM/DD/YYYY): \_\_\_\_\_ Appointment time requested: \_\_\_\_\_

After 6:00 PM or weekend (Saturday or Sunday)? Y/N \_\_\_

Description of project:

---

---

---

---

---

---

---

Specialized instruction required (specific machines needed or other needed instruction):

---

---

---

---

---

Please email the completed form to the Kao ICS email ([ics@utk.edu](mailto:ics@utk.edu)) to complete scheduling.