

PSF-User Accessibility Information Form

The responsible scientist:

..... ,

has left beamline: , at:

BL1 BL2 BL3

.....
Date (DD/MM/YY) Time (HH.MM)

and is accessible at:

.....

Location

.....

Complete Phone-No.

The expected time of return is:

.....
Date (DD/MM/YY)

.....
Time (HH.MM)



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