

**Application for 3D Scanning using SkyScan 1275 at  
The University of Idaho 3D Imaging and Printing Lab (IRIC 221)**

<b>Requestor</b>	Name	
	Email	
	Phone	
	Purpose of the scanning	
	Signature of faculty who authorizes the scanning (if the requestor is a student)	
<b>Geometry</b>	General Description of the scanning need	
	Dimensions in 3D (X, Y, Z)	
	Max Resolution needed	
	Location of the max resolution needed	
	Materials of the object	
	Any reconstruction after scan (yes/no)?	
<b>Funding*</b>	Funding source	
	Index number	
*needed to cover the replacement cost of the X-tray tube in the future.		
<b>The following section is to be completed by the Lab Administrator</b>		
<b>Director</b>	<b>Dr. Tao Xing's signature</b>	
<b>Approval Date</b>		
<b>3D Scanning Start time (e.g. 3 pm on 6/20/22)</b>		
<b>3D Scanning End time (e.g. 6 pm on 6/20/22)</b>		
<b>Cost</b>		\$

I agree to pay the cost shown above for this scanning job. I also agree to acknowledge the University of Idaho 3D Imaging and Printing Laboratory in any publications that use the images generated by this scanner in this request.

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**Signature of the PI of the Index number** **Date**