Record of Discussion for NSTX-U Research Collaboration

**Key results of discussions between prospective**

**NSTX-U collaborators and an NSTX-U Research Contact**

Please send completed and signed forms to Brent Stratton [(stratton@pppl.gov)](mailto:stratton@pppl.gov) and Stan Kaye [(kaye@pppl.gov)](mailto:kaye@pppl.gov) for review and comment.

Questions or comments regarding processing of this form should be forwarded to Thomas Egebo ([tegebo@pppl.gov](mailto:tegebo@pppl.gov)). The NSTX-U Project Fax Number is (609) 243-2222.

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| **Title of Research Activities:** | | | | **Collaboration began (mm/yy) or New:** |
| **Collaborator Institution:** | | | **Discussion Dates**  Initiated on:  Completed on: | |
| **Collaboration Principal Researcher:**  Name:  Email:  Tel:  Signature:  & Date: | **PPPL/NSTX-U Research Contact:**  Name:  Email:  Tel:  Signature:  & Date: | | | |
| **Research Goals:** | | | | |
| **Collaborator Research Tasks:**  **1)**  **2)**  **etc.** | | | | |
| **PPPL/NSTX-U Research Support Tasks:**  **1)**  **2)**  **etc.**  **Estimated Researcher Effort Required (Man-Months):** | | | | |
| **PPPL Engineering Support Tasks:**  **1)**  **2)**  **etc.**  **Estimated PPPL engineering support cost (see attached estimate):**  **NOTE to Collaborators and PPPL/NSTX-U Research Contacts:**  All equipment installations at PPPL are subject to PPPL design, drafting, and procedure requirements as per the PPPL quality assurance program and engineering policies.  PPPL industrial hygiene, electrical safety, environmental safety and health (ES&H), radiation protection and accelerator safety policies shall apply to all equipment installations for NSTX-U. | | | | |
| **Collaboration Researcher Questions and Issues:**  **1)**  **2)**  **etc.** | | | | |
| **Responses by PPPL/NSTX-U Research Contact and Task Manager:**  **1)**  **2)**  **etc.** | | | | |
| **Additional Collaboration Researcher’s Comments (if any):**  **1)**  **2)**  **etc.** | | | | |
| **Additional PPPL/NSTX-U Research Contact and Task Manager Comments (if any):**  **1)**  **2)**  **etc.** | | | | |
| **Review and Comment:**  **Head of NSTX-U Diagnostics**  Dr. Brent Stratton  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature Date | | **Review and Comment:**  **Head of NSTX-U Research**  Dr. Stanley Kaye  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature Date | | |