**Guidance for General User Access Proposals**

General User (GU) proposals are for access to both screening and high-end EMs at LBMS. These proposals are peer-reviewed by the LBMS Proposal Review Panel. Each project needs to be completed over the 2-year lifetime of the proposal. Before requesting access to high-end EMs, please include a cryo-EM micrograph and class averages to show the sample’s readiness.

Further instructions for online proposal submission can be found in the [LBMS User Guide](https://www.bnl.gov/cryo-em/userguide/getting-started.php).

*Use this template to write your LBMS General User Access Proposal and then copy/paste the information into the online PASS system. Please do not upload this document as a MS Word or PDF file.*

TITLE TAB

**Title**:

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*Indicate the primary field of research for this proposal and the funding source(s).*

EXPERIMENTERS TAB

*To associate someone with this proposal (including the PI, Co-PI, collaborators, etc.) first search for the person using the search bar below. If they are not found, click the "Add New Person" button below and you will be prompted to enter their name and email. Once the person is found (or entered), click the radio-button next to their name and then click the "Add Experimenter" button at the bottom of the search results list.*

*Important:*

* *Be sure to include yourself on the experimenters list (if applicable).*
* *Be sure to set the user access type for all experimenters.*
* *The PI or co-PI should be the lead individual responsible for the research performed. This is normally the holder of the grant that funds this work. Except in exceptional circumstances reflecting independent work, a student or postdoc should not be identified as the PI on a proposal.*

*Definitions of User Access type:*

* *On Site: a user physically present at a user facility during experiment*
* *Remote Access: a user actively participating in the experiments via video conferencing, beamline remote control, etc.*
* *Mail-In: a user that sent samples but will not be participating in data collection on site or remotely*
* *Off Site: A collaborator that is not participating in experiments onsite or remotely*

RESEARCH TAB

**Is this proposal a continuation of a prior proposal(s) that has expired? If yes, please provide the proposal number(s) and briefly explain the progress from the previous proposal(s) including any publications.** *(limit: 1000 characters including spaces)*

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**Abstract:**

*Provide a meaningful abstract of the proposed research below. This section may be used for funding agency reporting purposes; this information and the proposal title may become public information. (limit 1000 characters including spaces)*

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**Background and Motivation:**

*Describe the scientific, technical and/or the industrial/educational importance of this experiment. Explicitly state the objective(s) of the proposal and the expected outcome. (limit 2500 characters including spaces)*

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**Research Plan:**

*Provide an overview of the research plan, including sample characterization, cryo-sample preparation, preliminary results. List the EM(s) that are needed for the proposed experiments and provide an overview how each requested EM is needed for this project. (limit 2500 characters including spaces)*

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**Provide a brief description of team’s relevant prior experience and key publications.** *(limit 1500 characters including spaces)*

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**Provide any relevant literature references that will aid in reviewing this proposal.** *(limit 1000 characters including spaces)*

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**Research Screening Questions:***The Proposal Principal Investigator (PI), the person who is responsible for setting the direction for the funding, is required to answer the following research screening questions. These questions apply to the research in the upcoming proposal time or instrument experiment time at the Laboratory for BioMolecular Structure (LBMS) at Brookhaven National Laboratory, including all samples to be measured and ancillary equipment brought to LBMS.*

*By answering these research screening questions, you certify that your answers are complete and accurate, and that you understand that Brookhaven Science Associates will rely on the answers you provide to screen the research. If you are unsure how to answer the questions, you should contact your home institution’s Export Control Office.*

*Each time experiment conditions are modified (e.g., new samples/specimens not measured previously or new equipment / software), you are required to resubmit these Research Screening Questions.*

*The following points-of-contact for the proposal research screening questions are Lacy Jones (*[*ljones2@bnl.gov*](mailto:ljones2@bnl.gov)*) or Teresa Daniels (*[*teresa@bnl.gov*](mailto:teresa@bnl.gov)*).*

**Research Screening Question #1**

Are there any restrictions, contractually or otherwise, on public dissemination of the work (e.g., research, experiment) described in this proposal? Public dissemination includes presenting at conferences or open meetings, publications, or web source information.

* Yes
* No

**Research Screening Question #2**

Are you bringing any items (including specimens/samples), technical data, software, or services owned or funded by a nuclear, defense, military, space, intelligence agency, or a defense contractor of the United States or of another country?

* Yes
* No

**Research Screening Question #3**

For work (e.g., research, experiment) conducted at the user facility, are any items, technical data, software or services designed, developed, or modified exclusively for military applications, military training, spacecraft, launch vehicles, or national security or intelligence collection and analysis?

* Yes
* No

**Research Screening Question #4**

Would the research results be directly useful for- or would the research involve- a nuclear reactor application (e.g., commercial nuclear fuel, molten salts or other nuclear reactors, nuclear grade graphite, uranium enrichment)?

* Yes
* No

**Research Screening Question #5**

Are you bringing any items (including specimens/samples), technical data, or software to the user facility that requires access controls?

* Yes
* No

**Research Screening Question #6**

If the PI or co-PI (grant holder) of this beam time proposal is an employee of a DOE national laboratory, please affirm that your research has been screened by your National Lab against the DOE “Science and Technology Risk Matrix" critical and emerging research areas and technologies. The User Facility must be consulted if any research restrictions are required so that it can be determined if research restrictions can be accommodated.

**Note:** If you answered "No" or are unsure, you should contact your home institution's office responsible for screening research for the DOE S&T Risk Matrix.

**Reference:** Memorandum for Heads of Departmental Elements, Dan Brouillette, Science and Technology Risk Matrix Guidance, 12/13/2019.

* Yes
* No
* N/A

TIME REQUEST TAB

*In this section, please list all EMs needed for the lifetime of the proposal. Once the proposal is submitted, you may not add EMs in future time requests.*

*Notes:*

* *You may request up to 3 EMs*
* *The need for each EM must be justified separately.*
* ***Shifts Requested (Lifetime of the proposal)****: For each EM requested, enter the number of hours required for the lifetime of the proposal.*
* ***Shifts Requested (this cycle)****: For each EM requested, enter the number of hours required for this cycle.*
* High-end EM: Empire high-end EM (Krios G3i).
* Screening EM: Powell screening EM (Talos L120C), Stonewall screening EM (Jeol 2100).

Instructions:

To select an EM, click "Add Resource" and a pop-up window will open where you will enter:

**EM 1 (multiples of 8 hrs)**

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| Resource name (e.g. Empire high-end EM): |  |
| Technique (SPA or cryo-ET) |  |
| Hours Requested (Lifetime): |  |
| Hours Requested (This Cycle):  *(enter 0 if no shifts requested this cycle)* |  |

**Describe the experiments you will perform on this EM, including sample preparation, data collection, and analysis.** *(limit 2500 characters including spaces)*

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**Justify the need for this EM's capabilities, including justifying why you need the time requested.** *(limit 1500 characters including spaces)*

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*Be sure to click "Save" in the pop-up window.*

**EM 2 (if applicable)**

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| Resource name (e.g. Powell screening EM): |  |
| Technique (SPA, or cryo-ET): |  |
| Hours Requested (Lifetime): |  |
| Hours Requested (This Cycle):  *(enter 0 if no shifts requested this cycle)* |  |

**Describe the experiments you will perform on this EM, including sample preparation, data collection, and analysis.** *(limit 2500 characters including spaces)*

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**Justify the need for this EM's capabilities, including justifying why you need the time requested.** *(limit 1500 characters including spaces)*

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*Be sure to click "Save" in the pop-up window.*

**EM 3 (if applicable)**

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| Resource name (e.g. Powell screening EM): |  |
| Technique (SPA, or cryo-ET): |  |
| Hours Requested (Lifetime): |  |
| Hours Requested (This Cycle):  *(enter 0 if no shifts requested this cycle)* |  |

**Describe the experiments you will perform on this EM, including sample preparation, data collection, and analysis.** *(limit 2500 characters including spaces)*

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**Justify the need for this EM's capabilities, including justifying why you need the time requested.** *(limit 1500 characters including spaces)*

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*Be sure to click "Save" in the pop-up window.*