PASS System
Proposal Allocation Safety Scheduling

NSLS
NATIONAL SYNCHROTRON LIGHT SOURCE
home

End of Run Forms

View Notes

Form ID:	11392
Beamline Used:	3-ID
Start Date:	3/1/2018
End Date:	3/6/2018
Time requested this cycle:	6
Time received this cycle:	6
Name:	LI YUFENG
Institution:	Institute of High Energy Physics, CAS
Guest Number:	R7507
E-mail:	liyf@ihep.ac.cn

This user would like to be contacted with a status report.

1) **How satisfied were you with the fraction of the year that the facility operates?**
very satisfied

2) **How satisfied were you with the Beamtime scheduled (i.e., was beamtime delivered on schedule were beamtime outages kept to a minimum)?**
very satisfied

3) **How satisfied were you with the beam performance (i.e., was beam or service maintained close to specifications)?**
very satisfied

4) **How satisfied were you with the support for users provided by the NSLS-II staff?**
very satisfied

5) **How satisfied were you with the support for users provided by the beamline staff?**
very satisfied

6) **Which of the following benefits have resulted or will soon result from your use of this facility this year?**
Created new fundamental knowledge (i.e., basic research)
Discovered other new knowledge (i.e., applied research)
Dissemination of new knowledge via publication in peer-reviewed open literature

7) **How satisfied were you with the Safety Approval Form and the Beamline authorization processes?**
very satisfied

8) **How satisfied were you with the quality of general training (NSLS-II safety orientation, GERT, Stop Work) and BeamLine Operations and Safety Awareness (BLOSA)?**
very satisfied

9) Are the training and safety procedures appropriate?
yes

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10) What would you like the NSLS-II to do differently in the future that would assist users (not mentioned above)?
no more. very satisfied.

☐ Flag this form for follow up

☐ Issue has been identified

☐ Issue has been resolved

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