## mQACC Graduate Student Membership Application Form

## I. Applicant Information

Date of application (Month/day/year):	
Name (First, Middle Name/or Initial, Last):	
Degree(s):	
Institution and mailing address:	
Phone number (inc	clude country code):
Email address:	
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II. Sponsor Information	
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Name:	
Email address:	
Institution:	
III. Relevant experience/expertise:	

Briefly describe your involvement in the development of QA/QC processes being applied to untargeted metabolomics and how they are relevant to the work of mQACC:

## IV. Working Groups

If you wish to join a Working Group within mQACC, please indicate the Working Group you wish to join as indicated on the mQACC webpage (<a href="https://www.mqacc.org/wgs">www.mqacc.org/wgs</a>):

V. Intention to abide by stated mQACC policies and guidelines:

By signing this form, I affirm that I have read, understand, and am committed to the stated mission and objectives of mQACC

Signature Date