



APPLICATION TO USE THE RESEARCH LABORATORY

APPLICATION REQUIREMENTS

1. A completed application must be submitted at least three (3) days prior to the intended date of laboratory use.
2. Any cancellation of laboratory usage must be notified at least two (2) days before the scheduled date.
3. The applicant is not permitted to work alone in the laboratory.

A. DECLARATION AND DETAILS OF APPLICANT	
<p>I hereby declare that I am willing to comply with all rules, regulations, and guidelines established by ITAFoS regarding the use of the laboratory during and/or after office hours, including weekends and public holidays. I understand and acknowledge that I am fully responsible for any damage, loss of equipment or accessories, repair costs arising from my negligence, or any other charges that may occur. I also accept full responsibility for my personal safety and for the safety and security of the premises during my presence in the laboratory, as detailed below:</p>	
Full Name	: _____
Matric No.	: _____
Position	: _____ Tel. No. : _____
Date of Usage	: From ___/___/___ to ___/___/___ <input type="checkbox"/> Weekdays <input type="checkbox"/> Weekend
Time	: From _____ am/pm to _____ am/pm
Name of Laboratory	: _____
Equipment to be Used	: _____
B. ENDORSEMENT BY RESEARCH SUPERVISOR	
<p>I hereby certify that this student is required to carry out the project/research activity as stated above.</p>	
Signature and Official Stamp: _____ Date: _____	
C. APPROVAL BY LAB COORDINATOR/ MANAGER	
• Application is	<input type="checkbox"/> APPROVED <input type="checkbox"/> NOT APPROVED
• Duplicate key is	<input type="checkbox"/> SUPPLIED <input type="checkbox"/> NOT SUPPLIED
Signature and Official Stamp: _____ Date: _____	