MMU
MULTIMEDIA UNIVERSITY
FACULTY OF ENGINEERING AND TECHNOLOGY

FET/LAB/003/ver5

Application Form To Use FET Laboratory

* Application should be made in advanced at least 1 working day before the propose duration usage and submit this form to the lab staff before using the lab.
* Applicant must register in the logbook / form that is available in the lab for each time using the lab.
* Applicant could be asked to leave the lab should the need arises due to valid reason.
* No item / equipment to be taken out from the lab unless with approval from FET Management and following proper procedure
* Applicants would be billed for any damage or spoilt items / equipment used.
* Students are not allowed to hold the lab keys. Only FET Staffs are allowed to hold the lab keys.
* FET staff must get the lab key from the office if they want to work in the lab after office hours.
* Students must be accompanied by their Lab Supervisor when working in the lab after office hour. The Lab Supervisor would get the lab key from the office if their students are to work in the lab after office hours.
* For non FET students and Non FET staff, they can only use the lab with approval from the FET Dean or Assoc Dean. Their lab supervisor must accompany in the lab unless with LMC Chairman approval. For after office hours, beside their lab supervisor, the FET lab staff must be stationed in the lab throughout the duration of usage unless with LMC Chairman approval. Any overtime claim by FET lab Staff would be billed to the center or faculty of the applicant and this must be approved by their Head center / faculty before they are allowed to use
* The lab key held (with prior approval) must be returned to the office the next day morning and no duplication of the keys are allowed.

Section A – To Be Filled Up By Applicant

Date Apply   : _____   ID / IC   : _____

Applicant's Name   : _____

Contact No.   : _____   E-Mail   : _____

Name Of Lab   : _____

Type Of Activity   : Research – BSc / MSc / PhD / IFR / IRFA **/** PYP Project **/** Assignment **/** Others

Activity Title   : _____

Duration For Using The Lab :   Within Office Hour :- Yes / No

Date :- ___ / ___ / ___ to ___ / ___ / ___	Time : From _____ to _____	_____ No. Of Days

Cancel where irrelevant:- I am :- FET staff / FET student / Non FET Staff / Non FET student

For student's application & Non FET staff, photocopy their ID at the back of this form   Applicant Signature …………………………………

Section B – Approval By Student's Supervisor (Academician) *- For Students Application –*	Section C – Approval By Lab Supervisor *- For All Type Of Applicant -*	Section D – Approval By Dean / Assoc Dean *- For Non FET (Staff / Students) -*
------------------------------------ (Signature & Stamp & Date)	------------------------------------ (Signature & Stamp & Date)	------------------------------------ (Signature & Stamp & Date)

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Lab Venue:- …………………………………….   Applicant's Name:- …………………………………………....

                                                        Applicant's ID:- …………………………………………......

                                                        Duration Using The lab:- ……/……/….. to ……/……/…….

--   Period (state start & end time):- …………... to ………………..
(Lab Staff Signature & Stamp & Date)   **This slip must be kept by Applicant as proof of approval*