

**INSTRUMENT/ LABORATORY REQUEST FORM****LABORATORI PENYELIDIKAN SAINS HALAL (LaPSaH)**

Institut Penyelidikan Produk Halal, Universiti Putra Malaysia,

Putra Infoport, 43400 UPM Serdang, Selangor

Tel : 03-8947 1345/1341

Fax : 03-8943 9745

A. APPLICANT INFORMATION

Name : _____

Staff/matric No. : _____ E-mail : _____

Faculty /Institute : _____

Program : PhD / Master / Undergraduate / Others: _____

Tel/Fax/HP : _____

Sample type : _____

Quantity of sample : _____ Sample x _____ replicate

Instrument / lab request : _____

Accessory/ chemical/ consumable : _____

Cost of analysis : RM _____

Date booking equipment/lab : _____ days (_____ until _____)

Signature : _____ Date request : _____

B. SUPERVISOR

Supervisor Name's : _____

Vot. No. : _____ Balances : RM _____

Term :

- I will be responsible for my students and willing to bear the cost of repairs for damage during usage.
- I agree with the charges.

Signature & Cop : _____ Date : _____

C. FOR LABORATORY USEDPAYMENT

Quotation No. : _____

Payment Via : Cash / cheque / invoice / transfer journal / others: _____

Date settle payment : _____

Science Officer Signature & Cop : _____ Date : _____

INSTRUMENT / LABORATORY USAGE

Staff in charge : _____

Approved date for instrument/lab usage : _____

Signature : _____ Date : _____

Term and Condition:

1. Applicants must comply with the general rules and guidelines LaPSaH and IPPH.
2. Duration of equipment use is not more than three (3) days for each request.