Requesting form for using laboratory spaces after hours
School of Food Industry, King Mongkut's Institute of Technology Ladkrabang

Date..... Month..... Year.....

Student name ..... Tel. ..... Student ID No. .....
Program ○ B.Sc. ○ M.Sc. ○ Ph.D. Year ..... Major .....
Conducting ○ Special problem ○ Dissertation ○ Research study ○ Class ○ Other .....
Research title/ Course title .....
With the supervision of ..... as ○Advisor ○Project head ○Other .....

I would like to use the laboratory spaces **AFTER HOURS** with the colleague(s) as follows:

1) ..... (Tel. .....)	2) ..... (Tel. .....)
3) ..... (Tel. .....)	4) ..... (Tel. .....)

From Date..... Month..... Year..... to Date..... Month..... Year..... Total ..... night(s)

List of equipment requisition

No.	Date	Time	Equipment	Laboratory room

I confirm that I acknowledge the procedure to request the use of laboratory spaces and equipment and I agree to follow all the regulations and policy. In case of any damage, my advisor/project head and I or my colleague(s) are willing to accept full responsibility for the proved damage from our negligence.

(Signature) .....Student Date .....

❶ Comment of the advisor/project head

☐ Approved for using the laboratory spaces **after hours**. Student has submitted the COVID-19 vaccine certification and inform a list of places visited and activities during the past 14 days.

☐ Not approved because .....

(Signature) ..... Advisor/Project head Date .....

❷ Comment of the central laboratory staff

☐ Approved for using the laboratory spaces **after hours**.

☐ Not approved because.....

(Signature) ..... Central laboratory staff Date .....