

**BORANG TEMPAHAN INSTRUMEN/
BOOKING INSTRUMENT FORM
FAKULTI SAINS DAN TEKNOLOGI**

TEMPAHAN ALAT/ BOOKING INSTRUMENT:

(Nyatakan nama alat/ Name of the instrument)

FLOURESCENCE

A. MAKLUMAT PERMOHONAN/ APPLICATION DETAILS

Nama Pemohon/ Name of Applicant:		
No. Matriks/ Matrix No. :		
Alamat Pusat Pengajian/ Fakulti/Agensi Department/ School/ Faculty/Agency Address:		
No. Telefon/ Telephone No:	Pejabat/ Office: H/P :	No. Fax:
Emel/ E-mail:		
Tarikh/ Date:		

B. MAKLUMAT SAMPEL/ SAMPLE DETAILS

Bil. Sampel/ No. of Sample	:	_____
Label sampel/ Lable of sample	:	_____
Penjelasan Sampel/ Sample Description	:	_____ _____
Pelarut yang sesuai/ Suitable solvent	:	_____
Keperluan Analisis/ Analysis Requirement :		_____
(Cth:Suhu/ Tekanan/ Kolum dll)/		_____
(Exmp: Temp/ Pressure/ Column& ext)		
Lain-lain keperluan/ Other requirements	:	_____ _____ _____

C. STATUS PERMOHONAN & KELULUSAN/ APPLICATION STATUS & IMPROVAL

Perakuan Pengarah/ Ketua Jabatan/ Ketua Projek/ Penyelia Projek
Certified by Director/ Head of Department/ Head of Project/ Supervisor

*Perakuan/ Penolakan
Certify/ Decertify

Saya _____ bersetuju untuk membayar kos yang telah ditetapkan melalui peruntukan/
I _____ *agree to pay the stated amount for this analysis sample through the budget below:*

Kod Peruntukan Projek/ *Budget Code* : _____

Kos Analisis/ *Analysis Cost* : _____

Tarikh/ *Date*:

Tandatangan Pengarah Ketua Jabatan/ Ketua Projek/ Penyelia Projek:
Signature by Director/ Head of Department/ Head of Project/ Supervisor:

(Cop Rasmi/ *Official Stamp*)

D. UNTUK KEGUNAAN PEJABAT/ FOR OFFICE USE

Tarikh Terima Sampel/
Sample Received On : _____

Tarikh Siap/ *Complete On*: _____

Bil. Sampel yang Dianalisis/
No. of Analyzed Sample : _____

Jumlah Kos Analisis/
Analysis Cost : _____

Laporan Analisis/
Report Analysis : _____

Pengambilan Data : Ya/ Tidak

Tandatangan Operator Alat/ *Operator's Signature*

Tarikh/ *Date*:

Nama/ *Name* :