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| **ICMS Instrument Reservation Application****實驗室儀器預約使用表**

|  |  |  |  |
| --- | --- | --- | --- |
| **Requester Name** |  | **Supervisor** |  |
| **Student ID** |  | **Email** |  |
|  |  |  |  |
| **Instrument Name** |  | **Model** |  |
| **Assign Date** |  (年) (月) (日) 至 (年) (月) (日)  |
| **Justification** |  |

|  |  |
| --- | --- |
| ***Requester Signature*** | ***Instrument Assistant Signature*** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Remarks: Please send the request to instrument assistant and lab technician for approval at least one day in advance of using the instrument. E-mail confirmation and/or approval confirmation receipt will be send to the requester. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Approval Confirmation Receipt****(For office use)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is(are) approved to use \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ from \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ for \_\_\_\_ days. *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_*\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Lab Technician Signature Date* | **ICMS Instrument Reservation Application****實驗室儀器預約使用表**

|  |  |  |  |
| --- | --- | --- | --- |
| **Requester Name** |  | **Supervisor** |  |
| **Student ID** |  | **Email** |  |
|  |  |  |  |
| **Instrument Name** |  | **Model** |  |
| **Assign Date** |  (年) (月) (日) 至 (年) (月) (日)  |
| **Justification** |  |

|  |  |
| --- | --- |
| ***Requester Signature*** | ***Instrument Assistant Signature*** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Remarks: Please send the request to instrument assistant and lab technician for approval at least one day in advance of using the instrument. E-mail confirmation and/or approval confirmation receipt will be send to the requester. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Approval Confirmation Receipt****(For office use)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is(are) approved to use \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ from \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ for \_\_\_\_ days. *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Lab Technician Signature Date* |  |