

REQUEST FOR USE/LOAN OF EQUIPMENT AND/OR ACCESSORIES

UPIC-ASL Form 2
Revision 08
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Analytical Services Laboratory

Rm. 101, Institute of Chemistry Research Bldg.
University of the Philippines, Diliman, Quezon City 1101
e-mail: aslchem.upd@up.edu.ph

Name of User:

E-mail address:

Project leader/ thesis adviser:

User type (please tick appropriate box):

- UPD-IC Lab course, CHEM
 UPD-IC BS/MS/PhD Chemistry thesis
 UPD-IC Research
 UP Diliman student outside of UPD-IC

- UP student outside of Diliman
 UP research outside of UPD-IC
 Others

Accessory to be used at:

- ASL

(specify location)

Equipment	Accessory	Date & Duration of Use	Sample (s) to be analyzed
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Undertaking:

- I hereby acknowledge that I have been aware of the policies/guidelines on the use of equipment/accessories in the Instrument Room/Analytical Services Laboratory (ASL). I also agree to be held liable for any damages done on any accessory and/or equipment due to misuse of my student/research assistant. I hereby further acknowledge that I shall shoulder the cost of the damage which will be determined by the ASL.

Approved by:

ASL Laboratory Manager

Date

---THIS PERMIT IS NOT TRANSFERABLE---