REQUEST FORM FOR THE USE OF PHYSLAB SUPPORT (WORKSHOP)

Request #: _____ (for office use only)   Date: _____

Researcher's Name (Capital Letters):	
Supervisor's Name (Capital Letters):	
Department:	

Nature of job (please provide details):   ☐ Research   ☐ Lab Development   ☐ Other

_____

_____

_____

Proposed start date: _____   Proposed end date: _____

What facilities are required for the work (please provide details):

_____

_____

_____

Do you need assistance from Physlab Support staff: ☐ Yes   ☐ No

Are the required materials for the job available to you? _____

Do you need any materials from us? (please provide details):

_____

_____

_____

Will your department reimburse the cost of consumables? (please attach the letter): _____

RULES

1. As a general principle, the physics lab provides support to various Departments of the SSE and other universities of Pakistan as a matter of courtesy contribution to SSE's research vision.
2. The requester is responsible to reimburse material cost, cost of tool damages and machine damage.
3. The user of the facility is responsible for cleanup after use.
4. The user(s) have to follow the safety procedures during work in the workshop.
5. Untrained, unskilled and novice user cannot work in the lab unsupervised.

6. The physics lab support is not meant to be used for student activities, competitions and unsupervised projects even if they are part of coursework.
7. Extensive work will be entitled to being charged, especially when it involves design and drawing. Details will be discussed on a case by case basis.
8. Faculty led research has precedence over other jobs.
9. **The facility can be used only if this form is filled and agreed upon.**

DECLARATION

I have filled the form and read the rules of the workshop carefully. I hereby solemnly declare that I have understood the rules and should follow them during practice. I further declare that I shall strictly follow the safety procedures during my work.

Researcher's Name: _____   Supervisor's Name: _____

Signature: _____   Signature: _____

Email: _____   Email: _____

Date: _____   Date: _____

For office use only

☐ Accepted   ☐ Rejected

Incharge Physlab: _____

Signature: _____

Date: _____