

**TEMPAHAN ALAT/ *BOOKING INSTRUMENT*:**

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| 1. **MAKLUMAT PERMOHONAN/ *APPLICATION DETAILS***
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| 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: |  |
| 1. **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* :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| 1. **STATUS PERMOHONAN & KELULUSAN/ *APPLICATION STATUS & IMPROVAL***
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| 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*) |
| 1. **UNTUK KEGUNAAN PEJABAT/ *FOR OFFICE USE***
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|   Tarikh Terima Sampel/  *Sample Received* *On* : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tarikh Siap/ *Complete On*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Bil. Sampel yang Dianalisis/ Jumlah Kos Analisis/ *No. of Analyzed Sampel* : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *Analysis Cost*  : *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* Laporan Analisis/ *Report Analysis* : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Pengambilan Data : Ya/ Tidak  **Tandatangan Operator Alat/  *Operator’s Signature*  Tarikh/ *Date:***  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Nama/ *Name* :   |