

Request for Use of the Environmental Laboratory Outside Working hours

Faculty of Environmental and Resource Studies Mahidol University

I Mr. / Mrs. / Miss..... Lecturer Student ID.....

E:mail: Phone.....

Requires permission to use the science lab. Number of room(s) Keycard number.....

- | | |
|--|---|
| <input type="checkbox"/> 4410/1 Central Instrument Room 1
<input type="checkbox"/> Oven <input type="checkbox"/> Balance <input type="checkbox"/> Centrifuge <input type="checkbox"/> Fat Extractor | <input type="checkbox"/> 1301 Environmental Science Laboratory 1301(3 rd Floor Budding1) |
| <input type="checkbox"/> 4410/2 Central Instrument Room 2
<input type="checkbox"/> Refrigerator <input type="checkbox"/> Incubator | <input type="checkbox"/> 4510 Biology Laboratory 2 |
| <input type="checkbox"/> 4410 Biology Laboratory | <input type="checkbox"/> 4511 Chemical Laboratory 2 |
| <input type="checkbox"/> 4411 Chemical Laboratory 1 <input type="checkbox"/> Vacuum Evaporation | <input type="checkbox"/> 4514 Environmental Science Laboratory 4514 |
| <input type="checkbox"/> 4419 Advanced Instrument laboratory
<input type="checkbox"/> Balance 4 digits (dust paper) <input type="checkbox"/> UV/VIS <input type="checkbox"/> HPLC | <input type="checkbox"/> 4515 Environmental Science Laboratory 4515 |
| <input type="checkbox"/> Balance 5 digits <input type="checkbox"/> Automatic Desiccator <input type="checkbox"/> Freeze Dry | <input type="checkbox"/> 4516 Environmental Science Laboratory 4516 |
| <input type="checkbox"/> 4419/1 AAS <input type="checkbox"/> 4419/2 BOMB <input type="checkbox"/> 4419/3 TOC | <input type="checkbox"/> 4517 Environmental Science Laboratory 4517 |
| <input type="checkbox"/> 4419/4 GC Varian / <input type="checkbox"/> GC Thermo / <input type="checkbox"/> GCMS/MS | <input type="checkbox"/> 4518 Environmental Science Laboratory 4518 |
| <input type="checkbox"/> 4420 Environmental Science Laboratory 4420 | <input type="checkbox"/> 4519 Environmental Science Laboratory 4519 |
| <input type="checkbox"/> 4421 Environmental Science Laboratory 4421 | <input type="checkbox"/> 4520 Environmental Science Laboratory 4520 |
| <input type="checkbox"/> 4422 Environmental Science Laboratory 4422 | <input type="checkbox"/> 4521 Environmental Science Laboratory 4521 |
| <input type="checkbox"/> 4423 Environmental Science Laboratory 4423 <input type="checkbox"/> TKN | <input type="checkbox"/> 4522 Environmental Science Laboratory 4522 |
| | <input type="checkbox"/> 4523 Environmental Science Laboratory 4523 |

Reason for use

- Science project Thesis Teaching Research Other

Subject :

Application Request Details

- Experimental Equipment
 - Fume Hood Fat Extractor Furnace Biosafety Cabinet Microwave Digestion Unit
 - Others include.....
- Chemical used in the experiment

From...../...../..... To...../...../..... Time..... Mon – Fri (4.30 pm.- 9.00 pm.)

or/and Vacation 8.30 pm.- 4.30 pm. / 4.30 pm.- 9.00 pm. Total durationday (not more than 1 month/time)

With co-workersperson (s) As listed below.....

Signature(1)

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Position.....

Date...../...../.....

Signature(2)

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Position..... Advisor / Program Director.....

Date...../...../.....

Comments by Head of Environmental Laboratory

- Approved Not Approved

Signature(3)

(Miss Chutitorn Moothongnoi)

Position.....Head of Environmental Laboratory.....

Date...../...../.....

Comments by Deputy Dean or Dean

- Approved Not Approved

Signature(4)

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Position.....Deputy Dean.....

Date...../...../.....