

**Lab Work Request Form**  
**[Internal Requisitions]**

To Be Filled by the Requester		
Requester Details	Name: .....	Position: .....
	Tel: .....	Email: .....
	Signature:.....	Date: .....
Type of Service Required	<input type="checkbox"/> BOD (Carpenter, Electrician, etc...)	<input type="checkbox"/> IT services
	<input type="checkbox"/> Workshop (Mechanical services)	<input type="checkbox"/> Purchase Order
	<input type="checkbox"/> Ordering Chemical/Glassware from QU Store	<input type="checkbox"/> Analysis
	<input type="checkbox"/> Lab Space	
	<input type="checkbox"/> Other .....	
Priority	<input type="checkbox"/> Regular	<input type="checkbox"/> Urgent
Attachment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Description of the Service/Analysis and Estimated Time/Schedule	..... ..... ..... .....	
To Be Filled by The Department		
HoD Instructions for Lab Coordinator (if any): .....		
Consultation Required With Dr.Mert: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Comments by Dr. Mert (if required):.....		
Comments by Lab Coordinator:.....		
Signature by Lab Coordinator:.....Date.....		
The task will be conducted by: .....		
HoD Approval Signature:..... Date: .....		