

CENTRE FOR FOUNDATION STUDIES, IIUM INFORMATION TECHNOLOGY DEPARTMENT

COMPUTER LAB BOOKING

Customer's Information		
Name :	Staff No:	
Depart/Club/Society/Others:	Tel. / Ext :	
Purpose :	I Hereby agree/ disagree to the guideline stated	
Date :	Signature & Stamp: Date :	
Timr : From: Until :		
Vanue : ☐MPLA ☐CT Lab 2 ☐ ICT Lab 4		
ICT Lab 1	Recommendation (head of dept):	
│	I recommend / do not recommend this application.	
Equipment Required :	Signature & Stamp: Date:	
Others:	For Office Use /Information Technology Department	
Note & Guideline :	I am please /regret to inform you that your application has been approved / rejected	
1.Please submit ITD computer lab Booking form at least	,	
3 working days. 2. All equipment must be returned immediately after use. 3 Food and drink are not allowed in all labs.	Signature & Stamp: Date:	
o i ood and difficate not allowed in all labs.	orginature a otamp. Date.	

CENTRE FOR FOUNDATION STUDIES, IIUM INFORMATION TECHNOLOGY DEPARTMENT

COMPUTER LAB BOOKING

COMPOTER LAB BOOKING				
Customer's Information				
Name :		Staff No:		
Depart/Club/Society/Others:		Tel. / Ext :		
Purpose :		I Hereby agree/ disagree to	o the guideline stated	
Date :		Signature & Stamp:	Date :	
Timr : From:	Until :			
Vanue :				
☐ MPLA ☐ CT Lab 2	☐ ICT Lab 4			
☐ ICT Lab 1 ☐ CT Lab 3	☐ ICT Lab 5	Recommendation (head of dept):		
☐ ICT Lab E ☐CT Lab 6	☐ ICT Lab 7	I recommend / do not recommend this application.		
Equipment Required :				
LCD		Signature & Stamp:	Date:	
Others :		For Office Use /Information	Technology Department	
		I am please /regret to info	rm you that your application	
Note & Guideline :		has been approved / rejected		
Please submit ITD computer lab B working days.	sooking form at least			
2. All equipment must be returned in	nmediately after use.			
3 Food and drink are not allowed in all labs.		Signature & Stamp:	Date:	