

**GENERAL ADMINISTRATION
OFFICE OF THE DEPUTY RECTOR (RESEARCH & INNOVATION)**

OPEN MOBILE PANEL BOOKING FORM

Requestor's particulars

Name: _____ Staff/ Matric No.: _____

Post: _____ Telephone/ Ext No.: _____

Kulliyah/ Centre/ Division/ Institute/ Office: _____

Event particulars

Name of event: _____

Venue/s of event: (1) _____ (2) _____

Date/ day of event: _____/ _____ No. of panels: _____

Date/ day/ time of panel installation: _____/ _____/ _____

Requestor's signature: _____ Date: _____

Recommendation

Name: _____ Telephone/ Ext No.: _____
(Officer-in-charge/ Chairman of the event)

I hereby recommend/ do not recommend the above request.

Officer-in-charge/ Chairman's signature & official stamp: _____ Date: _____

Approval

Approved/ Rejected

Signature & official stamp: _____ Date: _____