



**CENTRAL RESEARCH & ANIMAL FACILITY (CREAM)
IIUM Kuantan**

Doc No.	: CREAM- L004
Rev. No.	: 05
Effective Date	: JAN 2020

APPLICATION FOR LONG -TERM LABORATORY FINGERPRINT ACCESS

NAME : _____
START DATE : ___/___/_____
END DATE : ___/___/_____

ACKNOWLEDGEMENT

1. I certify that the facts stated in the form are true and complete to the best of my knowledge and I understand that false statement(s) on this form will be grounds for strict disciplinary action.
2. I am responsible on my own safety during lab session and will responsible for any CREAM damage or lost made by my negligence.
3. I agree that this access is for my own use and **I am not allowed to bring in unauthorized user** without CREAM permission. If found guilty, CREAM will revoke the user access and ground for penalty.
4. If I were to bring visitor in, I understand that I will need to register them at the CREAM office.
5. I understand my fingerprint access will be **automatically revoked on the 31st December** each year and I will need to register again if I wish to continue use the CREAM lab.
6. I understand that I require to fill in Clearance Form once I have completed my lab work in CREAM.



REQUEST FOR FINGERPRINT ACCESS

Applicant's signature

Name :
Date :
HP no.:

FOR CREAM USE	
FingerTec ID	
CREATED ON (date)	
CREATED BY: STAFF IN CHARGE	Signature: Official stamp: