

BMSLAB LABORATORY MANAGEMENT DEPARTMENT OF BASIC MEDICAL SCIENCES KULLIYYAH OF MEDICINE INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA LABORATORY MANAGEMENT

BMS LABORATORY USAGE REQUEST FORM

(AFTER OFFICE HOURS / PUBLIC HOLIDAY)	
Unit	Anatomy & Medical Museum
(Please	Biochemistry – Molecular - Proteomic
tick)	Microbiology – Physiology - Pharmacology
	Centralized Teaching Laboratory
REQUESTOR INFORMATION	
REQUESTOR II	NFORMATION
Requestor Name	
Student/Staff No.	
Contact No.	
Email	
Department/Kulliy	yyah
Project Title	
Project Supervisor	
USAGE DETAILS	
Request Date	
Laboratory Name	
Purpose	
Request by (Signa	ture)
Date	
FOR LAB USE (ONLY
Approved by	
	BMS Laboratory Coordinator
Approved date	
Person in charge	
Designation	
Contact No.	
Remarks	Please contact the person in charge before entering the laboratory