**Form No.1**

|  |  |  |  |
| --- | --- | --- | --- |
| ※Date of approval  (Y/M/D) | / / | ※approval No. |  |

**Application Form for Approval for Use of Facilities**

Date (Y/M/D): / /

To The University-Business Innovation Center Director

Applicant: Laboratory name:

Name:

(Tel: - - )

I request the approval for use of facilities as follows.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name of facilities  to be used |  | | | | | |
| Purpose of use |  | | | | | |
| Date and time of use  (Y/M/D/Time) | From　　 / / / /  To / / / / | | | |  | |
| Name of the faculty member in charge of use  Name of the laboratory  he/she belongs to |  | | | | | |
| (In case of student's use) Name and ID number  of student |  | | | | | |
| Other matters for  reference |  | | | | | |
| \*  Conditions of approval |  | | | | | |
| \*  Date of receipt (Y/M/D)  Receipt number |  | \*  Name of  recipient |  | \*  Sum of  charges | | Yen |

NOTES:

1 Do not fill in the items with \*.

2 With regard to the time of use, include the time required for preparation and evacuation.

3 Attach materials related to the purpose of use (e.g. contents of research, etc.)