

Form 6

※Date of permit (Y/M/D)	/ /	※Permit No.	
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Application Form for Approval for Use of Facilities

Date (Y/M/D): / /

To The University-Business Innovation Center Director

Applicant: Laboratory name:

Name:

Seal

(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.)