

EQUIPMENT LOAN FORM
Centre for Research and Innovation (CRI)

1. PARTICULARS

Name : _____

Designation : _____ Staff Category : Permanent/Contract/Temporary

Phone (Off) : _____ Email : _____

Phone (H/P) : _____ Dept / Faculty : _____

2. EQUIPMENT DESCRIPTION

Laptop LCD Projector

Extension Wire Laser Pointer

Voice Recorder External Hard Disk

Others : _____
(please specify)

Equipment's Details : _____

Purpose : _____
(For research use only - please indicate Research Grant No.)

Duration : from _____ to _____

I hereby acknowledge receipt of the above equipment in good working condition. I accept full responsibility for the equipment loaned. I acknowledge that I am NOT permitted to transfer the loaned equipment to a third party.

Recipient Signature : _____ Date : _____

3. OFFICE USE ONLY

Loan Status : **Approved** **Not Approved**

Name : _____

Signature : _____ Date : _____

4. ACKNOWLEDGEMENT OF RETURN

Received by : _____

Signature : _____ Date : _____

Remarks : _____