Phytochemistry Laboratory Use Application Form

Student detail								
Name:				Student number:				
Supervisor:								
Research topic (If applicable):								
Safety training								
Please choose one of the following: I have passed the laboratory safety training in year;								
□ I have not passed the laboratory safety training. For the purpose of laboratory safety, I will								
Experiment and equipments								
I will conduct the experiment with the following equipments. The application date will be from								
to;								
	Rotary		MPLC		ТСМ		Freeze Dryer	
	Evaporator		WII LC		multifunctional		Theeze Dryci	
					Extractor			
	Molecular		20L-Rotary		Supercritical		HSCCC	
	Distillation		Evaporator		fluid extractor		Others	
	Prep HPLC		HPLC		Other:		Other:	
	. ,							
For supervisor/responsible staff only This student will be guided by the senior student to conduct the experiment								
until they are fully familiar with the operation in the laboratory.								
Remark: (Special requirements for the laboratory safety, the experiment or the chemical is dangerous)								
Signature: Date:								
The responsible academic staff Phytochemistry laboratory								
							te:	
Laboratory Technician Remark:								
Signature:						Da	Date:	

Remark : The supervisor/student is requested to inform the laboratory technician about the usage of new hazardous chemicals and the related preventive measures in time.