DOC NO : CENLAB/F/003 REV :06 EFFECTIVE DATE : 01/03/2022	REQUEST FORM
اونيۇرمىيتى مليسيا فىغ السلطان عبدالله UNIVERSITI MALAYSIA PAHANG AL-SULTAN ABDULLAH	UNIVERSITI MALAYSIA PAHANG AL-SULTAN ABDULLAH LEBUH PERSIARAN TUN KHALIL YAAKOB, 26300 KUANTAN PAHANG DARUL MAKMUR PHONE : 09-431 5046
	CENTRAL LABORATORY

A. CUSTOMER INFORMATION

Name	
Company/Institution	
Address	
Student ID	
Email	
Tel No	Fax No

B. SERVICE INFORMATION

	Testing	Training	Consultation	Others
No	Description/Type of Testing/Parameter			Method/Equipment
· · · ·				•

Return Sample to Customer
Dispose by Central lab (Refer to CENLAB/F/030 Disposal Form)

Central Laboratory will ensure the information as confidential and impartial and use reasonable efforts to protect the confidentiality of such information. We will not use the information for other than stated purpose.

The information contained in this form will be kept securely by Central Laboratory.

Customer's Signature	Recipient's Signature	

C. SAMPLE INFORMATION (fill by Central Lab's Staff)

Date Received		
Sample Marking		
Sample Description		
No of Sample	Normal	Abnormal
Action for abnormal		
Remarks		

D. VERIFICATION (fill by Technical Services Unit)

Verify by Date :_____ :_