

REQUEST FOR OFFICE SPACE

(This form should be sent to the institute director duly completed and signed)

Request

| | | | |
|---|---|---|--|
| Laboratory | Current number of scientific staff in the lab | Number of offices currently used for scientific staff | |
| Possibility of sharing space <input type="checkbox"/> yes <input type="checkbox"/> no | Start date for the new requested offices (likely) | Number of offices needed (or approximate m ²) | Duration (year) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 years <input type="checkbox"/> permanent |
| Justification of the request and any pertinent remarks | | | |

Head of unit

By this signature, the head of unit confirms that if the space is assigned it will be used exclusively for the purpose requested and will keep the institute and faculty informed of any changes of plan

| | | |
|----------------------------|------|-----------|
| Professor Name, first name | Date | Signature |
| Remark | | |

Recommendation by Institute Director

By his signature, the director/deputy confirms acceptance of the use of space mentioned below

| | | |
|-----------------------------|--------|-----------|
| Name, first name | Date | Signature |
| Amount of space recommended | Remark | |

Head of Infrastructure

By her signature, the Head of Infrastructure confirms acceptance of the use of space mentioned above

| | | |
|---------------------------|--------|-----------|
| Name, first name | Date | Signature |
| Amount of space allocated | Remark | |

REQUEST FOR LABORATORY SPACE

(This form should be sent to the institute director duly completed and signed)

Request

| | | | |
|--|---|--|--|
| Laboratory | Current number of scientific staff in the lab | Current lab space used for research (m2) | |
| Possibility of sharing space <input type="checkbox"/> yes <input type="checkbox"/> no | Start date (likely) | Lab space needed (m2) | Time horizon (year) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 years <input type="checkbox"/> permanently |
| Type of lab needed <input type="checkbox"/> Optics labs <input type="checkbox"/> Bio lab <input type="checkbox"/> Chem lab <input type="checkbox"/> Electronics lab <input type="checkbox"/> P2 lab <input type="checkbox"/> Nano lab <input type="checkbox"/> Other, specify | | Infrastructure needed <input type="checkbox"/> Chemical hoods <input type="checkbox"/> Glove box <input type="checkbox"/> Temperature control <input type="checkbox"/> Humidity control <input type="checkbox"/> Ground stability <input type="checkbox"/> Noise isolation <input type="checkbox"/> Cryogenics <input type="checkbox"/> Other, specify | |
| Justification of the request and any pertinent remarks | | | |

Head of unit

By this signature, the head of unit confirms that if the space is assigned it will be used exclusively for the purpose requested and will keep the institute and faculty informed of any changes of plan

| | | |
|----------------------------|------|-----------|
| Professor Name, First name | Date | Signature |
| Remark | | |

Recommendation by Institute Director

By his signature, the director/deputy confirms acceptance of the use of space mentioned below

| | | |
|-----------------------------|--------|-----------|
| Name, first name | Date | Signature |
| Amount of space recommended | Remark | |

Recommendation of Head of Infrastructure

By her signature, the Head of Infrastructure confirms acceptance of the use of space mentioned above

| | | |
|-----------------------------|--------|-----------|
| Name, first name | Date | Signature |
| Amount of space recommended | Remark | |

Dean’s office approval

| | | |
|---------------------------|--------|-----------|
| Name, first name | Date | Signature |
| Amount of space allocated | Remark | |