



REQUEST FOR OFFICE SPACE

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

F	(е	q	u	е	S	t
-	- 1		4				

	Current number of scie staff in the lab	entific Nu	mber of offices currently used	for scientific staff
Possibility of sharing space ☐ yes ☐ no	Start date for the new requested offices (like		mber of offices needed (or proximate m²)	Duration (year) 1 2 3 4 years permanent
lustification of the request and	any pertinent remarks	l		
Head of unit By this signature, the head of and will keep the institute and		_		or the purpose requested
Professor Name, first name	Da	te	Signature	
Remark				
Recommendatio				
		e of the use o		
Recommendation	deputy confirms acceptanc	e of the use o	f space mentioned below	
Recommendation By his signature, the director/of Name, first name Amount of space recommend Head of Infrastru	ed Re	ee of the use o	f space mentioned below Signature	ove
Recommendation By his signature, the director/of Name, first name	ed Re	ce of the use of the mark	f space mentioned below Signature	ove



STI Faculty STI - IN Infrastructures

REQUEST FOR LABORATORY SPACE

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

Request

yes no	boratory Current number of scientific staff in the lab		Current lab space used for research (m2)	
Optics labs Bio lab Chem lab Coruntrol Corund stability Cher, specify Cher, specify Cher, specify Cher, specify Cher, specify Chemical hoods Choruntrol Coruntrol Corund stability Chem lab Coruntrol Corund stability Chem lab Coruntrol Corund stability Corund s	Possibility of sharing space yes no	Start date (likely)	Lab space needed (m2)	□ 1 □ 2 □ 3 □ 4 years
Bio lab Chem lab Chem lab Chem lab Chem lab Chem lab Clectronics lab Clectroni	ype of lab needed		Infrastructure needed	
Bio lab Chem	Ontics labs		☐ Chemical hoods	
Chem lab Electronics lab P2 lab Nano lab Other, specify				
Electronics lab P2 lab Nano lab Other, specify Other, specify Cryogenics Other, specify Cher, specify Caryogenics Other, specify Caryogenics Other, specify Cryogenics Other, specify Cryogenics Other, specify Cryogenics Other, specify Cryogenics Other, specify Cryogenics Cother, specify Cother, specify Cother, specify Cother, specify Cother, specify C				
P2 lab	Electronics lab		· ·	
Other, specify	P2 lab			
Other, specify	Nano lab		· ·	
dead 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	Other, specify		□ Cryogenics	
Head of unit 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			☐ Other, specify	
nd will keep the institute and faculty informed of any changes of plan Professor Name, First name Date Signature	istilication of the request and a	iny periment remains		
	lead of unit		ianed it will be used exclusively	for the purpose requested
Remark	lead of unit y this signature, the head of ur	nit confirms that if the space is ass		for the purpose requested
	lead of unit y this signature, the head of ur nd will keep the institute and fa	nit confirms that if the space is assoculty informed of any changes of	olan	for the purpose requested
	lead of unit y this signature, the head of ur nd will keep the institute and fa	nit confirms that if the space is assoculty informed of any changes of	olan	for the purpose requested
	lead of unit y this signature, the head of ur nd will keep the institute and fa	nit confirms that if the space is assoculty informed of any changes of	olan	for the purpose requested

Name, first name	Date	Signature
Amount of space recommended	Remark	



STI Faculty STI – IN Infrastructures

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	