



REQUISITION FORM COMPUTING MACHINES

Details	Details of Requesting Client
Name of requestor	
Office No.	
Mobile No.	
Email	
Address	
Name of company	
Position	
	Computing requirements
1. Software required	
2. Duration of usage	
3. Non-disclosure agreement	
4. LAN or WAN	
5. Require training	
6. Disk space usage	
<u>Specific request:</u>	

Please email the completed REQUISITION form before sending samples for analysis to:

Mr. Fakruruzi Fadzil or Dr. Feizal Yusof (if not a ME undergraduate student)
 0.25, Applied Mechanics Laboratory, School of Mechanical Engineering,
 Tuanku Syed Sirajuddin Engineering Campus, 14300 Nibong Tebal, Penang.
 Email: mefakrur@usm.my or mefeizal@usm.my
 Tel : 04-5996351

Received by: _____

Date: _____

Remarks: _____