

# Jaypee Institute of Information Technology

## Department of Electronics & Communication Engineering

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### Lab Slot Request Form

Please fill out this form and submit it to the Lab Coordinator. This form is intended for internal faculty members booking lab slots for the semester.

#### 1. Faculty and Course Details

Faculty Name:	
Designation:	
Email ID:	
Contact Number:	
Program Level (PhD/M.Tech/B.Tech Major/Minor):	

#### 2. Lab Slot Requirements

Preferred Lab Days & Time Slots (Please check the lab availability from central time table):	
Number of Sessions required (1 session=3Hrs):	
Equipment to be used:	
<b>Brief Summary of the Work to be Carried Out", including a <b>step-by-step</b> process and consumables required. (100 words)</b>	

Signature of Faculty: \_\_\_\_\_

Signature of Lab coordinator: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of HOD: \_\_\_\_\_

Date: \_\_\_\_\_

Coordinator(s): Dr. Shruti Kalra, Dr. Hemant Kumar