

Reservation of Science Faculty Computer Room E501 (for UGC Funded Activities)

 Room ca For other 	pacity r releva	ant policy and re		efer to the web pag act Mr. Eric Yuen,			ence Faculty, at ex	.t. no. 2533.	
Name: Po						Position:			
Office/Dep	t.:		Contact Tel. No.:						
Usage:		Class/Teach	ing, Course (Code/Subj. Tit	le:				
Reserve:		Others, please state: Whole room Number of PC:				_	Other:		
Number of	users	s:							
Special Red	quire	ment: 🗖 Vic	leo Projector	☐ Micropho	one 🗖 Othe	r:			
Period:									
(Please tick)		Date:day / month / year							
		From	com to day / month / year day / month / year						
		day	/ month / year	day / r	nonth / year	•			
		Whole seme							
Please state	whe	ther your cla	ss/activity is	for staff/stude	ents of Science	ce Faculty:			
		Yes	•			•			
			Dent Other						
Please spec	ify th	ne correspon	ding date and	time in the fo	llowing table	e.			
		Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	
8:30 - 9	:30								
9:30 - 10	0:30								
10:30 - 1	1:30								
11:30 - 1	2:30								
12:30 - 1	3:30								
13:30 - 1	4:30								
14:30 - 1	5:30								
15:30 - 1		_							
16:30 - 1									
17:30 - 1									
18:30 -1									
19:30 - 2									
20:30 - 2									
21:30 - 2									
Ш									
Non-	-office h	nours, no technical	support provided						
Applicant's s	signat	ure:			Date:				
• •									
Science Facu	ılty Of	fice use only					Ref. No.:		
Your reques	t is								
	uccessi								
		cessful because :							
0	ther:								
Approved by	y:					Date:			
		IT coo	ordinator, SC	ID					