

Department of Chemistry

Transponder Loan Form

Name of Applicant: _____

Email: _____ Tel no. _____

Matric no or Staff no: _____ NRIC / Passport no: _____

Address in Singapore: _____

Name of Supervisor(s) [1] _____ [2] _____

Affix photo here

For chemistry students only :

Course of Study: MSc (Coursework)/ MSc (Research) / PhD Date of matriculation : Jan/Aug _____(Year)

For staff only :

Academic Staff / Non-Academic Staff / Research Personnel (under research grant) / Visiting Faculty

Other Department / Institute : _____

Contract period : From _____ To _____

Extension of transponder validity: Student: extension of candidature; Staff: proof of renewal of contract.

This part must be completed for all Research Personnel and Students only.

For Safety Training Committee : Safety test: Pass / Fail Name: _____ Signature: _____ Date : _____	For Supervisors : Approved / Not approved Name: _____ Signature: _____ Date : _____
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Terms and conditions for loan of transponder:

- 1 Transponder will be issued to those who are granted authorized access to offices and laboratories. Access to labs requires the passing of a safety test.
- 2 Transponder is not transferable. Disciplinary action will be taken against offenders who breach these terms and conditions.
- 3 The user is responsible for keeping the transponder in good physical condition. The department reserves the right to reject any transponder which is not in good condition.
- 4 Date of deactivation of transponder: for graduate students - 4 years from date of matriculation or on completion of studies/project, whichever is earlier; for staff - last day of contract or upon resignation. ***Transponder must be returned on completion of studies/work contract.***
- 5 Loss / damage transponder must be reported immediately to person in charge of transponder access within 24 hrs. The user will be responsible for any losses that arise from the unreported loss of transponder.
- 6 A replacement fee of **S\$45** will be imposed for the first transponder lost or not returned. A replacement fee of **S\$45** and an additional penalty of **S\$30** will be imposed for subsequent losses.

All information submitted in this form is true and complete. I will update this information whenever there are any changes.

Signature of Applicant : _____ Date Submitted _____

For Deputy Head of Department :

Approved / Not approved Name : _____ Signature _____

Transponder ID: _____ Collected by: _____ Date: _____
(Signature)

Authorised Access Locations

Location

[1] _____

[2] _____

[3] _____

[4] _____

[5] _____

[6] _____

[7] _____

[8] _____

Approving Staff

Name

Signature

Corridor

Y / N

Y / N

Y / N

Y / N

Y / N

Y / N

Y / N

Y / N

Location refers to the research lab, teaching lab or service lab that you wish to be granted access to. Permission must be sought from and counter-signed by the staff-in-charge of that facility.

For official use :

Date received :

Date done :

Signature :