Advanced Lab Booking Form\*

For Evening and Holiday use of University Labs

|  |  |
| --- | --- |
| Course Number :  | Section: |
| Course Title : |
| Faculty Name : | Faculty Assigned:  |
| Previous Class Schedule : | Make-up Class Schedule : |
| ☐ S | ☐ M | ☐T | ☐W | ☐R | ☐S | ☐M | ☐T | ☐W | ☐R | ☐F | ☐A |
|  |  |  |  |  |  |
| Date :Time : | Date :Time : |
|   Select LABS :  |
| * CSE LAB 01
* CSE LAB 02
* CSE LAB 03
 | * CSE LAB 04
* CSE LAB 05

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|   |
|  Signature of Faculty: Date:  |

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|  Signature of Head of CSE Dept. Date: |

\*Complete this form and submit this at the CSE department office (Room# 5001) to get access to the CSE Lab/CSE research lab and/or Center for Cognitive Skill Enhancement (CCSE or HEQEP-Lab) lab.

\*Please book one week prior to date.