DEPARTMENT OF BIOCHEMISTRY VOLUNTARY LAB ATTACHMENT

1. Personal Particulars

Full Name as in Passport/Identity Card (<u>underline</u> Family Name)				
Home/Postal Address:				
Current Institute:				
Hand phone No.:	Email Address:			
Nationality:	Home no.:			
NRIC/FIN:	Gender:			

2. Next-of-Kin Particulars					
Name	Relationship	Nationality	Address	Contact No.	

3. Attachment Details			
Name of Principal Investigator:			
Location of Lab:			
Start Date of Attachment:	End Date of Attachment:		
Brief Description of Attachment and Project to be done:			

Name of Research Staff/Post Doc that will be assigned to mentor the volunteer :

4. Terms & Conditions		
I have read the terms and conditions in Annex 1 and agree to abide by the rules stated.		
Signature of Volunteer	Date	

5. Confirmation by Principal Investigator	6. Confirmation by Head of Department
I confirm that I have personally explained the	Support / Not Support
Department and OSHE safety rules to the	
Volunteer and will ensure she/he is supervised	
at all times by another research staff while in	
the lab.	
Signature of PI / Date	Signature of HOD / Date

