

Project title







Detailed Information Form for Materials and Equipment to be purchased for the Research Project

Project Number							
No.	Device / Material	Device / Material	Number/Quantity	Potential	Potential	Section	College
	Name:	Model Number:		Manufacturer	Supplier		
1							
2							
3							
4							
5							
6							
Department and College to which the device or material will be assigned (as a custody):							
	I, the main researcher, certify that the required equipment and materials are not available in the department.						
	Main Researcher of the Research Project						
	Name:						



Signature: