

Centre for Intelligent Antenna and Radio Systems

Booking Request Form

Project Title:

Request # (CIARS use only): ?

User (full name):

User ID #:

Additional Authorized Attendees: ?

Supervisor:

Planned start date

Estimated end date:

Experimental Plan

- *Device(s) under test:* ?
- *Types of measurements:* ?
- *Highlights/additional comments:* ?
- *Illustration of experimental setup attached:* Y N
- *Major equipment needed:* ?
- *Health and safety considerations:* ?

I, the USER, understand that I must use CIARS equipment and facilities responsibly, and will report any damage or incidents.

**Reservations require at least 72 hours' notice to ensure all relevant resources are available and ready for use.*

Booking Request Forms will be reviewed in tandem with Supervisory Approval Forms.

Request submission date:

CIARS approval date: