### Department of ECE National Institute of Technology Calicut DST-FISTLab (ECED Block-II)

No. Date.

### <u>Facility Request Form</u> (NIT C students and staff only)

The following are the details of the study I wish to carry out at DST-FIST Lab, ECED, NITC

Equipment to be used	Dates and Timeslots Required	Types of study pla	Types of study planned		
Name and Roll	Ema	il:	Phone N	No:	
No.  Purpose: UG/PG/M.Phil., Project Work /Ph.D., Work / Research/ Others    (Please mention):					
Name & Signature	of Supervisor:				

Note: Students shall be extremely careful while using the advanced wireless communication testbed and will be responsible for damages due to mishandling.

# I agree to the following:

• All Publication of research work, resulting out of the use of the Testbed should acknowledge the project as given below:

"This work was supported by the Department of Science and Technology, Government of India via the FIST scheme under Grant SR/FST/ETI/2017/68"

### Signature of User

If not available on the requested dates whether booking is needed in the nearest slot available?

# **Coordinator:**

# For office use only

Allotted dates and duration		
Log Book Page No.	Experiment	
	performed by	

Contact: DHILSHA DAYANAND I M, dhilshadayanand@nitc.ac.in