**90th Anniversary of Chulalongkorn University Fund recipients’ Research Equipment Request Form**

**Batch............. Fiscal year....................................**

**Project’s name ..............................................................................................................................**

**Student’s name ..........................................................................................................................**

**Advisor’s name ..............................................................................................................................**

**1. Name of Equipment** **...............................................................................................................................................................**

**2. Characteristics of Equipment**

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**3. Reasons and necessities**

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**4. Price**

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**5. Equipment Image**