

This form collects personal data limited to administrative, educational, or training purposes. Without the consent of the individual, this information will not be used for other purposes, transferred, or disclosed, and will be handled in accordance with the university's data storage and security policies.

|   |  |  |  |
|---|--|--|--|
| <b>National Chung Hsing University</b><br><b>Department of Applied Mathematics,</b><br><b>Institute of Statistics and Institute of Data</b><br><b>Science &amp; Information Computing</b> |  | <b>Facility/Equipment Borrowing</b><br><b>Application Form</b> |  |
| Borrowing Unit  |  | Event Name   | Name of Borrower   |
|   |  |  | Phone Number   |
| Borrowing Time  | From: ___ Year ___ Month ___ Day ___ Hour ___ Minute<br>To: ___ Year ___ Month ___ Day ___ Hour ___ Minute<br>(Note: Borrowing time must align with office hours, i.e., 8:00 AM–5:00 PM. Borrowing during holidays or outside these hours is subject to special approval.)   |  |  |
| Purpose of Use  |  | Location   | <input type="checkbox"/> Room 724 <input type="checkbox"/> Room 302<br><input type="checkbox"/> Room 301 <input type="checkbox"/> Other: _____ |
|   |  | Number of People   |  |
| Equipment to Borrow   | <input type="checkbox"/> Air conditioner remote <input type="checkbox"/> Multimedia podium<br><input type="checkbox"/> Projector and projection screen <input type="checkbox"/> Other: _____   |  |  |
| Declaration   | I hereby declare that the borrowed facility/equipment will only be used for the stated purpose. I will ensure the proper use of the equipment and will not transfer it to others. Any damage or loss will be compensated, and a deposit of NT\$500 will be paid when borrowing. Signature of Borrower: _____<br>Reminders:<br>1. Ensure the room is tidy after use, and no food or waste is left behind.<br>2. Safety first—no flammable or dangerous materials are allowed.<br>3. Do not block exits or violate fire safety rules.<br>4. Maintain proper behavior; disruptive activities are prohibited.<br>5. Equipment must not be used for personal purposes, including software installation or other unauthorized actions. |  |  |
| Instructor's signature  |  | Chair's signature  |  |

Post-Event Inspection (to be completed after the event):

At 1:00 PM, upon confirming no damage to the room/equipment, the deposit can be refunded.

Deposit Amount Received:

Signature of Receiver:

Confirmation by Department Staff:

Returned items:

Air conditioner remote     Equipment/Notes     Deposit