



**Bench Fees Approval Form**

Name and Surname of Applicant: .....

Applicant's Identity Card No.: .....

Faculty: .....

Course: .....

Mode of Attendance: .....

Commencement Date:.....

Year of study	Yr1	Yr2	Yr3	Yr4	Yr5	Yr6	Yr7	Yr8
	€	€	€	€	€	€	€	€
<b>Amount of Bench Fees</b>								
<b>Breakdown of Bench Fees</b>								
Consumables/ Materials								
Hardware / Software								
Equipment								
Others (please Specify)								

**Supervisor:** ..... **Head of Dept:** ..... **Student:** .....

**Signature:** ..... **Signature:** ..... **Signature:** .....

**Date:** ..... **Date:** ..... **Date:** .....

Approval by the:

Director of Finance ..... Date: .....