|  |  |  |  |
| --- | --- | --- | --- |
| Tarikh */ Date* : |  | Tarikh Diperlukan  *Date Needed :* |  |

**Maklumat Pemohon */ Applicant Detail***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Nama*/Name* | : |  | | | | |
|  |  |  |  | | | |
| Kategori*/Category* | : |  | Pelajar */ Student* | |  |  |
|  |  |  | Staf Akademik */ Academic Staff* | | | |
|  |  |  | Staf Bukan Akademik */ Non Academic Staff* | | | |
| No.Pelajar/Staf  *Student/Staff ID* | : |  | | No.Tel/E-mel  *Phone no./Email* | : |  |
| Fakulti/Jabatan  *Faculty/ Department* | : |  | | | | |

**Butiran Bahan yang Diperlukan */ Required Material Detail***

|  |  |  |
| --- | --- | --- |
| Pengarang */ Author* : | | |
| Judul */ Title* : | | |
| Penerbit */ Publisher* : | | |
| Tempat Terbit */ Place of Publication* : | | |
| ISBN/ISSN : | Tahun */ Year* : | No. Panggilan */ Call No.* : |
| Jilid/Bil */ Volume/No* : | Edisi */ Edition* : | Mukasurat */ Page* : |
| Lokasi Bahan (Nama Universiti) */ Location* : | | |

Nota*/Note*:

1. **Sila beri butir-butir yang lengkap dan tepat mengenai bahan yang diperlukan**

***Please provide full information regarding the material needed,***

1. **Tempoh penerimaan bahan bergantung sepenuhnya kepada Pihak Pembekal. Pemohon akan dihubungi apabila bahan telah diterima**

***Acceptance of the material depends entirely on the supplier. The applicant will be contacted once the material has been received.***

1. **Pemohon faham dan bersetuju untuk membayar semua caj yang dikenakan (Jika ada)**

***The applicant understand and agree to pay all the chargers occurred (if any).***

1. **Pemohon bertanggungjawab sepenuhnya terhadap bahan yang dipinjam**

***The applicant is fully responsible for the borrowed item*.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Tandatangan Pemohon)

*Signature*

**Keterangan lanjut */ Further Inquiry*:**

**Pustakawan */ Librarian***

**Bahagian Perkhidmatan Pengguna */ User Services Division***

**Perpustakaan UniSZA */ UniSZA Library***

**Emel: libraryunisza@gmail.com**

**Tel: 09-6687810/8679 Faks: 09- 6687854**