**SURAT IJIN PENELITIAN DARI INSTANSI LUAR**

Nomor.Un.3.7.2/Lab/Farmasi/S.I.P.D.I.L/............./20........

Yang bertanda tangan di bawahini:

Nama :……………………………………………………………………

NIM :……………………………………………………………………

No.KTP/SIM :……………………………………………………………………

No.TelpAktif :……………………………………………………………………

Jurusan :……………………………………………………………………

Fakultas :……………………………………………………………..…….

Instansi :……………………………………………………………………

JudulPenelitian :……………………………………………………………………

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……………………………………………………………………

Pembimbing\*(Mhs) :……………………………………………………..……………

Bermaksuduntukmeminjam dan menggunakanRuang Laboratorium di Jurusan Farmasi FakultasKedokteran dan IlmuKesehatan UIN Maulana Malik Ibrahim Malang pada:

Hari / Tanggal :……………/……/……/20…...sd……../……../20….

(Berlaku3Bulan)\*

Ruang Laboratorium 1 : ……………………………………

Ruang Laboratorium 2 : ………………………………… (Sesuai Kebutuhan)

Ruang Laboratorium 3 : ………………………………… (Sesuai Kebutuhan)

Ruang Laboratorium 4 : ………………………………… (Sesuai Kebutuhan)

Ruang Laboratorium 5 : ………………………………… (Sesuai Kebutuhan)

KunciLoker : ………………….( Lab………………….) \*Jika Ada

Jaminan\* : **Rp. 200.000,- (*Dua Ratus Ribu Rupiah***)

Dengan perincian Alat- Alat Gelas, Bahan, dan Penggunaan Alat Instrumen sebagaimana terlampir.

Demikian surat ijin ini dibuat untuk dapat dipergunakan sebagaimana mestinya.

Malang,.............................,20....

Mengetahui,

Pembimbing (Bagi Peneliti Mhs)\* : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ …………...

NIP…………………………………

Kepala Laboratorium 1 :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 1………...

NIP…………………………………

Kepala Laboratorium 2 : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2………...

NIP…………………………………

Kepala Laboratorium 3 :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3………...

NIP…………………………………

Kepala Laboratorium 4 :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 4………...

NIP…………………………………

Kepala Laboratorium 5 :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 5………...

NIP…………………………………

Menyetujui,

Koordinator Laboratorium Laboran Penanggungjawab

Rahmi Annisa, M. Farm, Apt Fauziyah Eni Purwaningsih, S.Si

NIDT.19890416 20170101 2 123 NIPT. 201309022324

**Catatan:**

**Setelah pengajuanizinpenelitian, penelitibisamengajukan form permohonanpeminjamanalatgelas, form bahan, dan form pemakaianalat instrument**

**foto copy rangkap 3/sesuaikebutuhan**

1 UntukPenelitiYbs – (Asli)

1 UntukLaboranPj – (Copy 1)

1 UntukKepalaLaboratoriumMasing-MasingLab yang dituju(Copy 2 dst.)

\*PerbaruanSetiap3BulanSekali

\*UangJaminanbisadiambilsetelahberakhirizinPenelitian (BEBAS TANGGUNGAN)

Lampiran 1. **FormPengajuan Peminjaman Alat Gelas Farmasi Untuk Penelitian**

**Nama Peneliti : ........................................................**

**NIM/NIP : ........................................................**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NO** | **NAMA ALAT** | **UKURAN** | **MEREK** | **∑** | **KONDISI** | | **TANGGAL AMBIL** | **KET** |
| **SEBELUM** | **SESUDAH** |
| 1 |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |
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| 26 |  |  |  |  |  |  |  |  |

Telah Dicek Malang,.............................,20..

Laboran Penanggungjawab Pemohon

Fauziyah Eni Purwaningsih,S.Si ...........................................

NIPT. 201309022324 NIM/NIP..............................

Lampiran 2. Form Penggunaan Alat Instrumen

**Nama Peneliti : ........................................................**

**NIM/NIP : ........................................................**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No** | **NAMA ALATINSTRUMEN** | **Beri Tanda (V) Sesuai Kebutuhan** | **INSTANSI LUAR** | **KET** |
| 1 | HPLC |  |  |  |
| 2 | UHPLC |  |  |  |
| 3 | TLC VISUALIZER |  |  |  |
| 4 | PSA |  |  |  |
| 5 | FTIR |  |  |  |
| 6 | UV-Vis |  |  |  |
| 7 | VISKOMETER |  |  |  |
| 8 | ROTARY EVAPORATOR |  |  |  |
| 9 | NANOMAT 4 + HOTPLATE HPTLC |  |  |  |
| 10 | GRINDER |  |  |  |
| 11 | SENTRIFUGE |  |  |  |
| 2 | ULTRASONIK |  |  |  |
| 13 | OVEN |  |  |  |
| 14 | HOTPLATE |  |  |  |
| 15 | PH METER |  |  |  |
| 16 | LAMPU UV |  |  |  |
|  |  |  |  |  |

Telah Dicek Malang,.............................,20..

Laboran Penanggungjawab Pemohon

Fauziyah Eni Purwaningsih, S.Si ...........................................

NIPT. 201309022324 NIM/NIP............................

Lampiran 3. Rincian Penggunaan / Pembelian Bahan Kimia

**Nama Peneliti : ........................................................**

**NIM /NIP : ........................................................**

|  |  |  |  |
| --- | --- | --- | --- |
| **NO** | **NAMA BAHAN** | **JUMLAH (ML/L/ G/MG)** | **KET** |
| 1 |  |  |  |
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Telah Dicek Malang,.............................,20..

Laboran Penanggungjawab Pemohon

Fauziyah Eni Purwaningsih, S.Si ...........................................

NIPT. 201309022324 NIM/NIP.............................