**实验室安全设施申领表**

申领单位：

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **发放****信息** | **安全物资名称** |  |  |  |  |  |  |  |  |  |  |
| **申领数量** |  |  |  |  |  |  |  |  |  |  |
| **建账信息** | **领用数量** |
| **学院****研究院** | **资产账户名称及账号** | **存放地址****楼号、房间号** | **责任人** |  |  |  |  |  |  |  |  |  |  |
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备注：请各二级单位按要求逐一填报建账信息，由实验室与资产管理处负责调拨至资产领用人名下。

签领单位负责人（签字）：

签领单位（盖章）：

20 年月日