

Manufacturing Engineering Laboratory

Indian Institute of Technology Hyderabad
Ordnance Factory Estate
Yeddumailaram 502205

FOR MEL USE ONLY		
Work request No.		
Received date		
Expected delivery date		
Completed date		

WORK REQUEST

To be filled by Concerned authority with Signature, Name, seal and phone no.							
Dept./Sh	ops/Lab	s					
	Quantity						
This worl		Students projects	Sponsored project	Consultancy Project	Any other		Date
Note:		s, Drawings to be		Person to be contacted for clarifications		1	
 The students are expected to accompany and assist the lab personnel during the fabrication work. Remember, this request form is meant for usage of equipment and not of manpower. 					Phone no.	of Hop/s:	iida data
Sign. Of HOD/Guide. of Special tool/requirement if required:							
For appro	oval to C	Office-I/C sign.					
				- for MEL use only			
Γools & Co	nsumabl	es					
S.No.		Process		Tool		Rem	arks

Process details

	1 TO COOD WE COUNTY							
S.No.	Process	Machine(s)	Started Date/time	Finished Date/time	Remarks			