**Consignment Testing Request Form**

|  |
| --- |
| **Contact Details**Name of Contact:Affiliation of Contact:Address:Telephone (and FAX):E-Mail:Billing Address: |
| **Project Title:**  |
| **Details of the Testing Project** (if necessary, please attach additional sheets or documents): |
| **Transfer test results to third country or party?** Yes / No | **Intended for use in military/weaponry?** Yes / No |
| **The end application** (if any of the above is “yes”, please also explain) |  |
| **Preferred Date and Method of Meeting (in person or phone)** |  | **Preferred Date of Testing** |  |
| Testing Fee Calculation: | For Office Use |
|  Total: JPY |
| Comments: Facility Operator |

Please complete this form – **write inside of the thick-lined frame.**

I have read, understood and agreed to abide by the terms and conditions for overseas organisations consignment testing, and confirm that the information I have given is correct. I request the consignment experiment be conducted at the Centre of Nanosatellite Testing at the Kyushu Institute of Technology, Japan.



**Signature:**

**For Office Use**

**Title and Name:**

**Affiliation:**

**Date (DD/MM/YYYY):**

九州工業大学超小型衛星試験センター試験依頼書