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| Request Number | EMEC-DOC-ARF- |

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| **Academic Request Form** | | | |
| Request From |  | Request Date |  |
| HEI/Department |  | Contact Details(e.g. Email,Phone Number) |  |
| Date Required By |  |
| Information Required(Format if Relevant) |  | | |
| Information Use and Timescales |  | | |
| **Expected Outputs and Timescales** |  | | |
| **Any Additional Partners** |  | | |
| **EMEC Involvement**  **E.g. Input to research papers** |  | | |
| **Further Details** |  | | |