

STATISTICAL CONSULTING FORM

In order to schedule an appointment for you with StatLab, please complete and submit this form. The form can be emailed as an attachment to statlab@isrt.ac.bd.

A. GENERAL INFORMATION

NAME: _____

EMAIL: _____

PHONE: _____

STATUS: STUDENT FACULTY EXTERNAL CLIENT

NAME OF DEPARTMENT (student and faculty only): _____

If student, please fill out the following information:

LEVEL OF STUDY: _____
NAME OF SUPERVISOR (for thesis students): _____

External clients please complete the following:

NAME OF ORGANIZATION: _____
POSITION/AFFILIATION: _____
ADDRESS: _____
NAME OF SUPERVISOR (IF APPLICABLE): _____

STATISTICAL BACKGROUND:

Please list any previous statistical courses taken, if any, and knowledge of statistical software.

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]
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B. NATURE OF PROBLEM AND SERVICES

DESCRIPTION OF PROBLEM:

Please give a concise description of the problem you are requesting statistical help for. In the case of students, please indicate whether the problem is a part of your thesis or project report.

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

SERVICE SOUGHT:

Please mention what your expectations are for the appointment. If you are a student working on a thesis or project report, please be aware that Statlab will NOT analyze data for you. You are advised to consult the webpage at <https://www.isrt.ac.bd/statlab> for details regarding services provided by Statlab.

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

C. WRITTEN PERMISSION FROM SUPERVISOR OR CHAIRMAN (FOR STUDENTS ONLY)

Statlab requires written permission from the Supervisor (for thesis students) or Chairman of Department before consultation may be provided for the problem described and services requested in this form (see part B). Please ask your Supervisor/Chairman to read this form and sign below **only if permission is granted**.

NAME: _____ Please tick Chairman Supervisor

DESIGNATION: _____ DEPARTMENT: _____

SIGNATURE: _____

DATE: _____

D. SIGNATURE OF CLIENT

NAME: _____

SIGNATURE: _____

DATE: _____