



## PURCHASE REQUEST FORM

### For SingHealth Duke-NUS Academic Clinical Programmes

*This form is only applicable for procurement through Duke-NUS tapping on the Academic Clinical Programme (ACP)'s Academic Advancement WBS. All procurement of items should support **research, education or Academic Medicine initiatives** in the ACP.*

*This form is to be completed and submitted to JOAM Academic Liaison & Strategic Relations Team.*

**Important Notes:**

- This form may take you less than 5 minutes to complete.
- Please allow us to get back to you within 3 working days upon your request.
- All fields marked with \* are mandatory.
- Please submit the completed form to Terence Tee at [terence.tee@duke-nus.edu.sg](mailto:terence.tee@duke-nus.edu.sg) and Qian Rou at [gmsv1683@nus.edu.sg](mailto:gmsv1683@nus.edu.sg).

**ACP\*:** \_\_\_\_\_ **Date of request:** \_\_\_\_\_

| Requestor Information |  |  |  |
|-----------------------|--|--|--|
| <b>Name*</b>          |  | <b>Contact Number*</b><br><small>(Office and/ or Mobile)</small> |  |

| Contact Person Information (For delivery purposes) |  |  |  |
|--|--|--|--|
| <b>Name*</b>                                       |  | <b>Contact Number*</b><br><small>(Office and/ or Mobile)</small> |  |
| <b>Delivery Address*</b>                           |  |  |  |
| <b>Delivery Date*</b>                              |  |  |  |

| Item(s) Description*          | Quantity* |
|-------------------------------|-----------|
|                               |           |
|                               |           |
|                               |           |
|                               |           |
|                               |           |
| <b>Any Special Packaging:</b> |           |
|                               |           |

**Purpose of the purchase\***

*Note: Please include details of ACP events/meeting and date if possible such as how the procurement supports Academic Medicine.*

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