Requisition Form Central Instrumentation Facility



| Student/User Name E-mail | | Supervisor Name E-mail | | |
|--|----------------------|-------------------------|--|---------------------|
| | | | | Department / Centre |
| Telephone/mobile number | Date of Request | | Expected date of Measurement | |
| Technique to be used | User ca | tegory | Mode of payment | |
| Atomic Force Microscope | JMI | | JMI Internal Fund Transfer | |
| X-ray Diffractometer | Oth | er Institution | Cash | |
| FTIR | Indu | ıstry | DD/Cheque | |
| UV-visible spectrophotomete | er | | | |
| Contact angle analyzer | | | | |
| Dynamic Light Scattering sy | stem | | | |
| Robotic Crystallization syste | m | | | |
| RT-PCR | | | | |
| Spectrofluorometer | | | | |
| Potentiostat (CV/EIS) | | | | |
| Media filtration assembly | | | | |
| High Speed Server | | | | |
| Number of samples | Sample type and name | | Details of DD/Cheque (For others): | |
| Nature of the characterization required: | | Important I | Note: ult CIF staff for sample preparation details before | |
| Sample characterization only | | characteriza | | |

Undertaking:

I/we undertake to abide by the safety and sample preparation guidelines and precautions during testing of my sample. I/we shall not claim for any damage/harm to my samples submitted for the analysis using CIF equipment.

I/we shall give due acknowledgment to CIF for measurement and help in the results (if any) so published in journals and inform CIF about the publications which acknowledges the use of CIF facilities. A copy of the published paper may please be submitted for CIF records.

User/Student Signature

Sample characterization and analysis

Supervisor Signature/Stamp

Contact Details:

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