USER REQUEST FORM

Cryostat (Photo and dark current measurements

| Name of the User Supervisor Name Department Employee & ERP ID (Internal users only) Name of the fellowship and Year (Internal users only) (Example, 1st Year -SSN JRF) Address Email ID Phone Number Number of Samples Name of the samples Sample 1 Sample 2 Sample 2 Sample 4 Sample 5 Scanning voltage range Type of sample Invoice/Receipt Address GST GST PAN Emil ID Thin film/Crystal/Other (Minimum solid sample size: 25 mm x 25 mm x 1mm) Invoice/Receipt Address CST CST CST CST CST CST CST C | | | |
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| Department Employee & ERP ID (Internal users only) Name of the fellowship and Year (Internal users only) (Example, 1st Year - SSN JRF) Address Email ID : Phone Number : Number of Samples : Name of the samples Sample 1 : Sample 2 : Sample 3 : Sample 4 : Sample 5 : Scanning voltage range : Type of sample : Thin film/Crystal/Other (Minimum solid sample size: 25 mm x 25 mm x 1mm) Invoice/Receipt Address : | Name of the User | : | |
| Employee & ERP ID (Internal users only) Name of the fellowship and Year (Internal users only) (Example, 1st Year -SSN JRF) Address : Email ID : Phone Number : Number of Samples : Name of the samples Sample 1 : Sample 2 : Sample 3 : Sample 4 : Sample 5 : Scanning voltage range : Type of sample : Type of sample : Invoice/Receipt Address : GST : | Supervisor Name | : | |
| (Internal users only) Name of the fellowship and Year (Internal users only) (Example, 1st Year -SSN JRF) Address : Email ID : Phone Number : Number of Samples : Name of the samples Sample 1 : Sample 2 : Sample 3 : Sample 4 : Sample 5 : Scanning voltage range : Type of sample : Thin film/Crystal/Other (Minimum solid sample size: 25 mm x 25 mm x 1mm) Invoice/Receipt Address : GST : | Department | : | |
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| Email ID : Phone Number : Number of Samples : Name of the samples Sample 1 : Sample 2 : Sample 3 : Sample 4 : Sample 5 : Scanning voltage range : Type of sample : Thin film/Crystal/Other (Minimum solid sample size: 25 mm x 25 mm x 1mm) Invoice/Receipt Address : GST : | (Internal users only) (Example, 1 st Year -SSN JRF) | : | |
| Phone Number : Number of Samples : Name of the samples Sample 1 : Sample 2 : Sample 3 : Sample 4 : Sample 5 : Scanning voltage range : Type of sample : Type of sample : Type of sample : Invoice/Receipt Address : GST : | Address | : | |
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| Sample 1 : Sample 2 : Sample 3 : Sample 4 : Sample 5 : Scanning voltage range : Type of sample : Thin film/Crystal/Other (Minimum solid sample size: 25 mm x 25 mm x 1mm) Invoice/Receipt Address : GST : | Number of Samples | : | |
| Sample 2 : Sample 3 : Sample 4 : Sample 5 : Scanning voltage range : Type of sample : Thin film/Crystal/Other (Minimum solid sample size: 25 mm x 25 mm x 1mm) Invoice/Receipt Address : GST : | Name o | of th | ne samples |
| Sample 3 : Sample 4 : Sample 5 : Scanning voltage range : Type of sample : Thin film/Crystal/Other (Minimum solid sample size: 25 mm x 25 mm x 1mm) Invoice/Receipt Address : GST : | Sample 1 | : | |
| Sample 4 : Sample 5 : Scanning voltage range : Type of sample : Thin film/Crystal/Other (Minimum solid sample size: 25 mm x 25 mm x 1mm) Invoice/Receipt Address : GST : | Sample 2 | :/ | |
| Sample 5 : Scanning voltage range : Type of sample : Thin film/Crystal/Other (Minimum solid sample size: 25 mm x 25 mm x 1mm) Invoice/Receipt Address : GST : | Sample 3 | : | |
| Scanning voltage range : Type of sample : Thin film/Crystal/Other (Minimum solid sample size: 25 mm x 25 mm x 1mm) Invoice/Receipt Address : GST : | Sample 4 | :\ | |
| Type of sample : Thin film/Crystal/Other (Minimum solid sample size: 25 mm x 25 mm x 1mm) Invoice/Receipt Address : GST : | | i | |
| (Minimum solid sample size: 25 mm x 25 mm x 1mm) Invoice/Receipt Address : GST : | Scanning voltage range | : | |
| GST : | Type of sample | : | Thin film/Crystal/Other (Minimum solid sample size: 25 mm x 25 mm x 1mm) |
| | Invoice/Receipt Address | : | |
| PAN : | GST | : | |
| | PAN | : | |
| | | | |

Signature of the User

Signature of the Supervisor/Signature of the Project Investigator/Head of the Department/Director of the Centre WITH SEAL

| | For office use only | |
|---|--------------------------------------|--|
| | Total amount (inclusive of 18% GST): | |
| • | Signature of Dean/Staff-In-charge: | |

Service charges (Inclusive of GST): Internal (SSN): 300 Rs/sample

External (Educational Institutions): 600 Rs/sample External (R&D labs and Industry): 1200 Rs/sample

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