USER REQUEST FORM



	· · · · · · · ·	
Name of the User	:	
Supervisor Name	:	
Department	:	
Employee & ERP ID (Internal users only)	:	
Name of the fellowship and Year (Internal users only) (Example, 1 st Year -SSN JRF)	:	
Address	:	
Email ID	:	
Phone Number	:	
Number of Samples	:	
Name of	f th	e samples
Sample 1	:	
Sample 2	:	
Sample 3	•	
Sample 4	:	
Sample 5	:	
Scanning range (2 theta)	:	
Type of sample	:	Powder/Alloy/Thin film/Wafer/Other
Invoice/Receipt Address	:	
GST	:	
PAN	:	

Signature of the User

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

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

<u>Service charges (Inclusive of GST):</u> Internal (SSN): 150 Rs/sample

External (Educational Institutions): 250 Rs/sample External (R&D labs and Industry): 500 Rs/sample

Contact details: Dr. R. Govindaraj (Mobile: 9790346912) & govindarajr@ssn.edu.in