USER REQUEST FORM

FTIR

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	:	500 cm ⁻¹ to 4000 cm ⁻¹
Type of sample	:	Powder/Thin film/Wafer/Other
Invoice/Receipt Address	:	
GST	:	
PAN	:	
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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:			

Service charges (Inclusive of GST):

Internal (SSN): 150 Rs/sample

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