

ALAGAPPA UNIVERSITY

(A State University Reaccredited With 'A+' Grade by NAAC)



Karaikudi-630003

UNIVERSITY SCIENCE INSTRUMENTATION CENTRE

Requisition form for Internal Users of Alagappa University

Name in Capital	:	
Position /Designation	:	PG / M.Phil / Ph.D / PDF/Staff
Name of the Research Supervisor	:	
Name of the Department	:	
Email ID/Mobile#	:	
Number of samples	:	
Characterization Study to be done	:	
Sample Code	:	
Nature of the samples	:	Thin Film/ Powder/ Polymer/ Biomaterial/Others
		For thin films – Sample Size - < 5mm(I) × 5 mm(w) x 3mm(t). Material should be in dry condition.
#	Should b	e mentioned
!		+ GST 18 % Grant Total
:		5653 of Indian Bank - AC Campus, Karaikudi and the original Challan is enclosed.
Users are requested to acknowle RUSA 2.0 in their research publication		USIC facility supported by DST-PURSE and
•	Signatur pervisor	e of the Signature of the HOD with seal
Date:	F ^	
		ffice Use
Date of Sample Analysis		Director



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UNIVERSITY SCIENCE INSTRUMENTATION CENTRE

Requisition form for External Users

Name in Capital	:			
Position/Designation	:	PG / M.Phil / Ph.D / PDF/Staff		
Institution with Address	:			
Email ID/Mobile	:			
Number of samples	:			
Sample Code	:			
Nature of the samples	:	Thin Film/ Powder/ Polymer/ Biomaterial/Others		
		For thin films – Sample Size - < 5mm(I) × 5 mm(w) x 3mm(t). Material should be in dry condition.		
Characterization Study to be done	:			
Amount per Sample Total+ GST 18 % Grant Total				
DD NoRsRs				

Terms and Conditions:

- Samples will be analysed as on "received condition". The cash bill or sample will be sent to the user, on submission of self-addressed **stamped** envelope. Cash Bill will be issued after analysis only. Generally, samples are available only for a week after analysis.
- Magnetic material for TEM and Potentially hazardous samples are not accepted for analysis. Under normal circumstances status of result can be enquired after 20 working days.

I/We agree to the above terms and conditions.

Signature of the Student	Signature of the	Signature of the HOD	
Date:	Supervisor with seal	with seal	
<u>For Office Use</u>			

Director