



UNIVERSITY SCIENCE INSTRUMENTATION CENTRE

Requisition form for External Users

Date:

Name:

Position:

Department:

Institution with Address:

Email ID/Mobile# :

Purpose: PG project / M.Phil Project / Ph.D work/Industry Samples

Number of samples* :

[* Self addressed stamped envelope should be sent for the return of samples, # Should be mentioned]

Sample Code with Description# :

Number of Samples..... Amount per sample..... GST 18 %..... Total..... DD No..... Name of the Bank..... Dt..... Rs..... (In favour of The Registrar, Alagappa University, Karaikudi)
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Nature of the samples: **Thin Film/ Powder/ Polymer/ Biomaterial/Others**

Characterization Study to be done:

Additional Information if any:

Signature of the Student

Signature of the Supervisor with seal

Signature of the HOD with seal

For Office Use:

Sample Analyzing Date:..... DD Remittance Date:..... Account No:..... <div style="text-align: right; margin-top: 20px;">Director</div>
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UNIVERSITY SCIENCE INSTRUMENTATION CENTRE

Requisition form for Internal Users

Name: _____ Date: _____

Position: _____ Department: _____

Institution with Address: _____

Email ID/Mobile#: _____
 [# Should be mentioned]

Purpose: PG project / M.Phil Project / Ph.D work

Number of samples: _____

Number of Samples..... Amount per sample..... GST 18 %..... Total.....

Challan Details: Indian Bank AC Campus, Karaikudi. **A/C.No.530793493** Dt..... Rs.....
 (In favour of The Registrar, Alagappa University, Karaikudi)

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Director