

REQUISITION FORM
CENTRAL INSTRUMENT FACILITY
DHSK College, Dibrugarh-786001

User Information

Name of the User :

Designation :

Department/Centre :

Address :

.....

Phone Number :

E-mail address :

Transaction No. with date :

Transaction Amount : ₹.....

Job Description:

1. Name of the facility to be availed (See List):
2. Nos. of samples:
3. Type of the sample (organic, inorganic, biological, mp/bp etc):
4. Whether toxic, corrosive, hygroscopic or radioactive: (Yes/ No)
5. Solvent/media to be used (if necessary):

(Please attach separate sheets if space above is insufficient)

Undertaking:

I hereby certify that the user is a Bonafede research student/employee of our institution. I/we undertake to abide by the safety guidelines and precautions during testing of my sample. I/we shall not claim for any damage/harm to my samples submitted for the analysis. I/we shall give due acknowledgment to CIF, DHSK College, Dibrugarh for measurement and help in the results (if any) so published in journals, thesis etc. and inform CIF about the publications which acknowledges the use of CIF facilities. A copy of the same will be submitted for CIF records.

.....
User/Student's Signature

Date:

Place:

.....
Head of Institute/Guide

Date:

Seal:

Contact Details:

In-Charge, Central Instrumentation Facility, DHSK College, Dibrugarh, Assam-786001

E-mail: cif_dhsk@gmail.com Phone No: 8486263738/ 9435130495

A/C No. 31919093051 of SBI, Gabharupathar Branch, IFSC: SBIN00089089.

Photocopy of this form can be used.

Rule may be change as and when require.