For Office Use Only
S. No. _____

Date : _____

Advanced Instrumentation Research Facility

JAWAHARLAL NEHRU UNIVERSITY
NEW DELHI-110067, India
Tel: 011-26704600, 26704560; TeleFax: 011-26742604

Revised on February, 2010

Requisition Form for use of Facility

Name:..... ....

Designation:..... ....

Address.....

....

Tel/ Mobile no:.....**Email**:..... ....

User Category: (Tick) JNU ☐ Other Govt. Institutions ☐ Industry/ Private ☐

Instrument to be Used: .....

Date of Usage: ..... **Number of samples:**..... ...

Type of Sample:..... ....

Nature of service required

1. Sample Imaging/ Sample Analysis only
2. Sample preparation with Sample Imaging/ Sample Analysis Report
3. Sample preparation, Sample Imaging/ Sample Analysis and Interpretation of Analysis (Complete)

Mode of Payment: *JNU Internal Fund Transfer ☐ #DD/ Cheque ☐ Cash ☐

*- Only for JNU faculty and Researchers #- For other Government Institutions and Industry / Private

Head of Budget (for JNU internal Fund Transfer)..... ....

Details of DD/ Cheque (For others)..... ....

Important Note: Kindly consult AIRF staff for sample/ sample preparation before bringing your samples for analysis.

Undertaking

I/we undertake to abide by the safety and sample preparation guidelines and precautions during testing of my samples. I/we shall not claim for any damage/harm to my samples submitted for the analysis by AIRF equipments.

I/we shall give due acknowledgment to AIRF along with the name of the person(s) providing the technical help in the results so published in journals and also inform AIRF about the publications which acknowledges the use of AIRF facilities.

Signature of User
Date of submission of requisition:

Signature with stamp
(User Faculty/ Dean/ Chairperson/ Head of Institution/ Chief Investigator)

Signature of AIRF instrument Operator
Date of submission of requisition

For Office Use Only:
Deposit Amount: ....
Details of Slip: ....
Signature of Depositor: ....