

Advanced Instrumentation Research Facility

JAWAHARLAL NEHRU UNIVERSITY

NEW DELHI-110067, India

Tel: 011-26704600, 26704560; TeleFax: 011-2674260. Email: gsaijnu@gmail.com

Revised on February, 2010

Requisition Form for TEM/ SEM

Request for :

Sample Preparation	EM Viewing	EDX
--------------------	------------	-----

S. No. _____

Date : _____

Name &
Address of Chief
Investigator with
designation,
Email and Tel. No.

User Name &
Designation

Email & Mobile
No.

User Category:	JNU	Other Govt. Institutions	Industry/ Private
----------------	-----	--------------------------	-------------------

Type of Sample: _____

Number of Samples: _____ Name of fixative: _____ Duration: _____

Orientation Required

T.S.	L.S.	Any
------	------	-----

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

Note:

- Biological samples will be accepted only after primarily fixation with suitable fixative.
- For TEM, samples should be trimmed into 1.0 -1.5 mm thick pieces (4 - 5 pieces for each sample).
- For SEM, samples the thickness may be upto 1 cubic cm.
- Fixation may be done in 2.5 % Glutaraldehyde and 2 % paraformaldehyde made in 0.1 M sodium phosphate buffer (pH 7.2). The fixed sample should be brought at AIRF, JNU in fixative or in phosphate buffer at 4 °C preferably between 10 am to 1 pm (Working days).
- Maximum of 10 samples per requisition form will be accepted for analysis in one day.

For Office Use Only:

Deposit Amount:

Details of Slip:

Signature of Depositor: