

User Details:

SCANNING PROBE MICROSCOPE

Room No:107, MSRC Building
Department of Physics
Indian Institute of Technology Madras, Chennai – 600 036.



JOB REQUISTION FORM

Name:		Date:	
Roll No/II	O No:		
		alty/Staff/Others (Specify):	
Guide / Co	oordinator / Supervisor's Name:		
Departmen	nt:		Lab. / Centre:
Contact No.:		E-mail ID.:	
Sample D	etails:		
S.No	Sample composition (Thin film)	Mode of Operation (Contact or Tapping)	Remarks
Remarks	(if any):		
Signature of User		Signature of Guide/Coordinator/Supervisor	
		with seal	
Signature	of Faculty in charge		
	ase bring CD for copying the data (
Onl	y thin film samples are allowed. Ma	aximum 2 samples per slot.	
For Laboratory Use only		D.	C1 .
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Remarks.:		Operator's Name:	
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