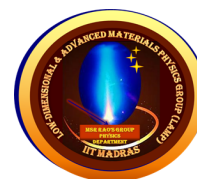




PHOTO LUMINESCENCE SPECTROMETER
 Room No:105, MSRC Building
 Department of Physics
 Indian Institute of Technology Madras, Chennai – 600 036.



JOB REQUISTION FORM

PROJECT NO: IT/17-18/PHY/001/AAAA/MSRA

User Details:

Name: _____

Date: _____

Roll No/ID No: _____

B.Tech./D.D./M.Tech./M.S./Ph.D./Project/Faculty/Staff/Others (Specify): _____

Guide / Coordinator / Supervisor's Name: _____

Department: _____

Contact No.: _____

E-mail ID.: _____

Sample Details:

S.No	Sample composition	Sample type (Thin film/Pellet/Liquid)	Excitation Wavelength
Remarks (if any):			

Certification and undertaking by Financially Responsible person: (HOD/Principal/Guide/Manging Director/Senior Official). Certified that the sample submitted belong to the user mentioned above. I agree to acknowledge the usage of the facility in all publications arising out of the usage of the NFMT/MSRC/IITM facility. The details of publications will be intimated to the MSRC.

Signature of User

Signature of Guide/Coordinator/Supervisor
with seal

Signature of Faculty in charge

Details of the Demand Draft

DD No: _____ Date: _____ Amount: _____ Bank: _____ (Or)

Mention the Project Number : _____

Note: Please bring CD for copying the data (USB drives are not permitted)

Duration per slot is 1 hour. Please mention the Project Number.

For Laboratory Use only

JobNo.: _____

Date: _____

Slot: _____

Remarks.:

Operator's Name: _____

Signature: _____