

CSIR - CENTRAL ELECTROCHEMICAL RESEARCH INSTITUTE

KARAIKUDI - 630 003

REQUISITION FORM FOR FLUORESCENCE SPECTROSCOPY

1. Name of the User (Mr. / Ms. / Dr.) :
Designation & Dept./Division
2. R&D Institution / University /
Industry, Name and Address :
3. Email ID :
4. Phone No. / Mobile No. :
5. Purpose : UG/PG/M.Phil Project Work /Ph.D Work / Research
Others(Please mention):
6. Number of Samples :
7. Nature of Samples : **Liquid**
8. Emission wavelength range (nm) :
9. Excitation wavelength (nm) :
10. Precautions to be followed if any :
11. Sample Requirement : **5ml (solvent name may be specified)**
12. Remarks / Special analysis request,
if any :

Certified that the request is for academic / above mentioned purpose. Concessional charges may kindly be collected. Further certified that we will undertake guarantee for the payment of concessional charges.

Signature of the User

Signature of the Guide

Signature of the HoD / Principal

Date:

Seal

Charge per sample:

University / Academic Institution / CSIR Labs	R&D Labs	Industry
₹.400 + 18% GST	₹.800 + 18% GST	₹.1600 + 18% GST