



UNIVERSITY SCIENCE INSTRUMENTATION CENTRE

Requisition for Characterization Analysis

Name: _____ Date: _____

Position: _____ Department: _____

Institution with Address: _____

Email ID/Mobile: _____

Purpose: PG project / M.Phil Project / Ph.D work

Number of samples: _____ DD No.....Dt.....Rs.....
 (In favour of The Registrar, Alagappa University, Karaikudi)

Sample Code with Description: _____

Nature of the samples: **Thin Film/ Powder/ Polymer/ Biomaterial/Others**

Characterization Study to be done: _____

Additional Information if any: _____

Signature of the Student

Signature of the Supervisor with seal

Signature of the HOD with seal

For Office Use

Director