

For office use only

Sr. No.....

Date: / /

**REQUISITION FORM FOR Potentiostat galvanostat ZRA**

**DEPARTMENT OF MSME**

**MANIT BHOPAL (M.P.)**

1. NAME OF THE USER:.....

2. DESIGNATION:.....

3. ADDRESS OF DEPARTMENT/CENTER:.....  
.....

4. E-MAIL: ..... 5. CONTACT NO.....

6. Users: Industry  Educational or R & D Institute  MANIT

7. Sample Specification (Metal/Alloy): (Please  $\surd$  one or more)

Size of the sample required: Diameter 1 to 2.5 inch Thickness 0.5 to 1.5 inch

**Recommendation from Head of Department/Institute/Industry/Center**

The above samples may be accepted on the behalf of our department/ Institution/ Industry/Center

Signature of user Supervisor's  
(for student's only)

Signature of Head of Department

With official Seal

Signature of the user

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Consultancy serial No..... Sample ID.....

Payment received receipt no.....DD/cash.....Dated.....Amount: .....

**Signature of the Instrument Operator**

**Signature of Lab In charge**

**Note: The charges for Academic (Rs. 500 + GST) - R&D Institute is (Rs 1000/- + GST), Industry (Rs. 3000 + GST) per sample**

**DD should be made in favour of "ICSC, MANIT" payable at Bhopal.**