



Central Research Facility Centre
National Institute of Technology Srinagar

Email: crfc@nitsri.net Website: <http://nitsri.ac.in>

ZEISS Gemini SEM 500 FE-SEM and Octane Elect EDS
Requisition form

Name: _____ Designation: _____
Contact No: _____ Email ID: _____
Name of the Supervisor: _____ Department: _____
No. of Samples: _____ Sample Type: _____
Organization / Institute: _____ Date: _____

Details of the samples

| S. No. | Sample Code | Nature of sample | Gold Coating Required? | EDS required? (Yes/ No) |
|--------|-------------|------------------|------------------------|-------------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |

Instructions

1. Maximum of 4 samples with 3 image captures per sample are allowed per requisition / slot.
2. If the sample(s) are hazardous to the personnel or equipment, kindly provide appropriate handling instructions.
3. Samples requiring gold coating must be mentioned in the booking form clearly.
4. Moisture within the sample is not allowed for study. Hydrated samples must be dried.
5. Allotment of slot will be communicated via mail /phone.
6. One can get a maximum of 2 consecutive slots at a time (approximately four hours) and for a particular user maximum 4 slots can be allotted in a month.

(P.T.O)



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Undertaking

- I/We undertake to abide by the safety, standard sample preparation guidelines and precautions during testing of samples. I/We do understand the possibility of samples getting damaged during handling and analysis. I/We shall not claim for any loss/damage to samples.
- CRFC shall not take any responsibility about the analysis, interpretation and publication of data acquired by the end user.
- I/We agree to acknowledge CRFC, NIT SRINAGAR in our publications and thesis if the results from CRFC facility are incorporated/ used in them.
- I/We hereby declare that the results of the analysis will not be used for the settlement of any legal issue.
- CRFC, NIT Srinagar reserves the rights to return the samples without performing analysis and will refund the analytical charges (after deduction of GST) under special Circumstances.

Signature of the user

Signature of the supervisor/PI

Signature of the HOD with stamp

For Office use only

Lab reference no:.....

No. of samples:.....

Invoice/Receipt no:.....

Name and signature of operator

Name and signature of laboratory in-charge