VELS

INSTITUTE OF SCIENCE, TECHNOLOGY & ADVANCED STUDIES (VISTAS)
(Deemed to be University Estd. u/s 3 of the UGC Act, 1956)
PALLAVARAM, THALAMBUR, PERIYAPALAYAM-CHENNAI
ACCREDITED BY NAAC WITH 'A++' GRADE

CENTRAL INSTRUMENTATION LABORATORY (CIL) FACILITY

ANALYSIS REQUEST FORM

(* sample & analysis information to be filled mandatory)

Analysis	:	**Atomic Force Microscope (AFM) (**4 images/sample)
*Mode of Analysis	:	[Contact/ Non-contact/ Tapping] (Please tick ✓**)**
Billing Name of the user	:	
		(INTERNAL / EXTERNAL (ACADAMIC/INDUSTRIES)
Designation	:	
Department/ Centre	:	
College/ Institution/ University/Industry	:	
Mobile number	:	
Email Id	:	
Number of sample(s)	:	Sample ID :
*Nature of sample(s)	:	(Organic/Inorganic/Polymer/Geological/Biological)
*Scan area (1-50 □m)	:	1 X 1 □m^2, 5 X 5 □m^2, 10 X 10 □m2, 15 X 15 □m^2
*Property of sample(s)	:	Powder/ Pellet/ Film // Toxic/Non-Toxic (Please tick ✓**)**
Name & Address of the Guide	:	
Signature of the User	:	
*Signature of the Guide with Seal	:	
Mode of payment	:	**CASH / DD (Rs……. /-)**
Receipt / DD No, Date, Bank & Branch	:	

FOR OFFICE USE

Job Number: **Analysis Date:** **Report:** Complete//Incomplete//Repeat

Dean signature with date :

Operator' signature with date :

Note:
DD should be drawn in favor of **"VISTAS, CHENNAI"** payable at Chennai.
Data will be supplied only in the rewritable compact disc (RW-DVD).
For further details, contact at: **Email :** technicalofficer.cilab@vistas.ac.in
Mobile : **+91 9962506284**

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