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 (* to be filled mandatory)

Analysis : **Thermogravimetric analysis (TGA)**

*Mode of Analysis : **[TGA alone//TGA-DSC] [Heating //Heating+cooling]**

*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 :

*Name of sample(s) :

*Nature of sample(s) : **Powder/ Pellet/ Film//Toxic/Non-Toxic** (Please tick ✓**)**

*Expected Decomposition Temperature :

*Temp. Range (+**30 to +1500 ^{o}C**) : Starting Temp. : Ending Temp. :

*Heating rate :

Atmosphere : **N_2** Crucible: **Al_2O_3**

Name & Address of the Guide :

Signature of the Student/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: **E mail :** technicalofficer.cilab@vistas.ac.in

Mobile : +919962506284

Any publication out of this work should be duly acknowledged as **"VELS INSTITUTE OF SCIENCE, TECHNOLOGY & ADVANCED STUDIES (VISTAS), CHENNAI"**