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 : **Powder X-ray Diffraction (P-XRD) (max 5 samples per slot)**

Billing Name of the User :
(INTERNAL / EXTERNAL (ACADAMIC/INDUSTRIES)

Designation :

Department/ Centre :

College/ Institution/ University :

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 ✓)

*Scanning Range (2Θ Range) : **From:** **To:**

Name & Address of the Guide :

Signature of the User :

Signature of the Guide/Head 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: **+91 9962506284**

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