

## TEM- Requisition form

Date: \_\_\_\_\_

- 1 Name of the student/End User: \_\_\_\_\_
- 2 Contact number & Email: \_\_\_\_\_
- 3 Name of the Guide/PI: \_\_\_\_\_
- 4 Guide/PI contact Number&Email: \_\_\_\_\_
- 5 Name of the Organization/Institute: \_\_\_\_\_

6 User Category: 

Academic	Government R&D	Private Industry
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7 Billing Name & Address:

8 GST Number: \_\_\_\_\_

**9 Sample Information:**

Number of samples:

S. No.	Sample Code	Sample type *	Sample preparation requirements **	Data requirements ***	Remarks
1					
2					
3					
4					
5					
6					

**Note:**

- a) Please specify if these samples are hazardous (reactive/corrosive/explosive/radioactive, etc.)/presence of moisture/presence of volatile organic compound/beam sensitive, etc. If so, specify the appropriate handling instructions.
- b) Please specify the suitable liquid medium if drop-casting need to be done at our lab.
- c) In case electropolishing/ion milling is needed, the user shall submit a 3mm diameter circular sample of thickness less than 100µm
- d) Please provide details of sample preparation and analysis requirements based on the sample nature.
- e) \*: Powder/liquid/Metal/Ceramic etc..., \*\*: Drop casting/Twin jet electropolishing/Ion milling, etc..., \*\*\*: Images/EDS/Diffraction etc...
- f) As collected data will be provided to the user, and it does not include any data analysis.
- g) The samples will be discarded a week after the completion of the analysis. The user shall make necessary arrangements if need the samples back.

**Declaration:**

- a) I declare that this form is meant for providing information only and not for any medico-legal purpose.
- b) I confirm that the samples mentioned above are only for research purposes. All the information furnished is correct and true to the best of my knowledge and I will be responsible for any damages caused due to incorrect data provided or by suppressing useful information.

Signature of the Guide/PI

Signature of the Student/user