

ANNEXURE-III

**CENTRAL INSTRUMENTATION FACILITY (CIF)
OP JINDAL UNIVERSITY**

OP Jindal Knowledge Park, Punjipathra, Raigarh, Chhattisgarh (India) - 496109,
Telephone no: +91-9445884028, Email-id: cif@opju.ac.in

Requisition form for (_____)

Date: ____/____/____

Name: _____ Designation: _____

Contact No.: _____ Email ID: _____

Organization: _____

Address: _____

Purpose of analysis: _____ No. of Samples: _____

Name of Guide/Supervisor: _____ Department: _____

Organization: _____

In-house Project/Sponsored Project/Consultancy Project: _____

Title of Project: _____

Beneficiary: *Internal/External (if internal, please specify):*

Name: _____ Designation: _____

Employee ID: _____ Organization: _____

Facility Opted: Metallurgical/Welding/Electrical/Chemical: _____

Material Details (Chemical, Physical, Radioactive, Hazardous, others):

S. No.	Name of the Sample and Sample Number (as per the label indicated)	Analysis Condition	Precautions or specifications or adjustments	Required Parameter or property
1.				
2.				
3.				
4.				

Any special Instructions on analysis: (Keep Brief)

Transaction Details

Date	Payment Mode Online/Offline	Google Pay/Phone Pay/ Paytm/Others	Transaction/Reference Number	Amount

Note:

- Any specific instructions on handling the materials must be clearly mentioned by the beneficiary. Use extra sheet.
- User is requested to adopt standard technique for preparation of samples before giving them for material testing
- We agree to acknowledge CIF, OPJU in our publications and thesis or any kind of report document if the CIF instruments results are incorporated/ used in them.
- Max of 4 samples per requisition form is allowed.
- Inappropriate samples will be returned back.

- The beneficiaries may contact the CIF personnel for the specifications of the material or sample preparation procedures.
- CIF, OPJU reserves the rights to return the samples without performing analysis and will refund the analytical charges under any special circumstances.
- If in any case the beneficiary requests to return the samples without performing analysis then 40% of the analysis charges will be refunded.
- **Filled Requisition form should be emailed to cif@opju.ac.in**

Name and signature of the user

Name and signature of the supervisor/PI

Signature of the HOD with stamp

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Type of Sample:	No. of samples:	Samples received on:
Samples analyzed on:	Lab reference no:	Invoice/Receipt no:
Report generated on:	Report emailed on:	Remarks:

Name and signature of operator

Name and Signature of HOD

Head, CIF