



ANNEXURE-III

CENTRAL INSTRUMENTATION FACILITY (CIF) O.P. JINDAL UNIVERSITY

O.P. 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: | 3 () 7 |
| Purpose of analysis: | No. of Samples: |
| Name of Guide/Supervisor: | Department: |
| Organization: | |
| In House Project/Sponsored Project/Consultance | ey Project: |
| Title of Project: | |
| Beneficiary: Internal/External (if internal, ple | ease specify): |
| Name: | Designation: |
| Employee ID: Or | ganization: |
| Facility Opted: Metallurgical/Welding/Electrica | al/Chemical: |

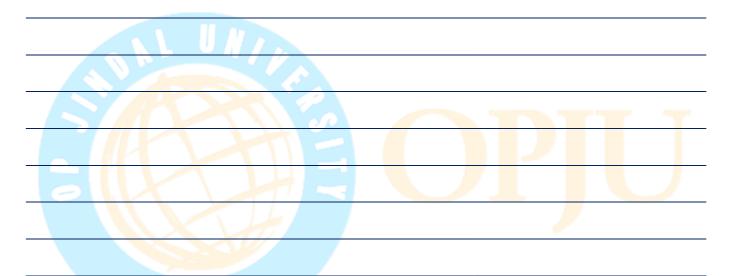




Material Details (Chemical, Physical, Radioactive, Hazardous, others):

| 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 analys | sis: (Kee | ep 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 re | equests to return the same | oles without performing analysis then 40% of |
|---|----------------------------|--|
| the analysis charges will be refi | | |
| and under our control | | |
| | | |
| | | |
| | | |
| Name and signature of the | user N | Name and signature of the supervisor/PI |
| | | |
| | | |
| | 4 | |
| | Signature of the HO | D with stamp |
| | | |
| | 0.00 | |
| <u>F0</u> | r office use only/केवल का | यालय प्रयाग हत् |
| Type of Sample: | No. of samples: | Samples received on: |
| Samples analyzed on: | Lab reference no: | Invoice/Receipt no: |
| Sumples unaryzed on. | Lab reference no. | mvoice/receipt no. |
| Report generated on: | Report emailed on: | Remarks: |
| | | |
| | | |
| | _ | |
| Name and signature of operator | | Name and signature of HOD |
| | | |
| | | |
| | | |
| | Head, CIF | |