



**Guru Gobind Singh Indraprastha University**  
Sector – 16C, Dwarka, New Delhi - 110078

**Requisition Form for using instrument(s) under Central Instrumentation Facility (CIF), CEPS**

Request for:

Instrument Name	Number of Samples	Internal/External User	Department
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Date: \_\_\_\_\_

Name & Address \_\_\_\_\_

of Principal Investigator \_\_\_\_\_

with Designation, \_\_\_\_\_

Email and Tel. No. \_\_\_\_\_

User Name & \_\_\_\_\_

Designation \_\_\_\_\_

E-mail & \_\_\_\_\_

Mobile No. \_\_\_\_\_

User Category	GGSIPIU	Other Govt. Institutions	Industry/Private
Mode of Payment:	Internal Fund Transfer	Demand Draft	Demand Draft
Details:			

Number of Samples: \_\_\_\_\_

Orientation Required: \_\_\_\_\_ Hazard/Toxicity: \_\_\_\_\_

**Undertaking**

I/we undertake to abide by the safety and sample preparation guidelines and precautions during testing of my samples. I/we shall not claim for any damage/harm to my samples submitted for the analysis by TRC lab equipments.

I/we shall give due acknowledgement to TRC along with the name of the person(s) providing the technical help in the results so published in journals and also inform TRC about the publication which acknowledges the use of TRC facilities.

Signature of User

Signature with Stamp

(User Faculty/Dean/Head of Institution/Principal)

Date of submission of requisition

Signature of TRC Instrument Incharge

Date of submission of requisition

**For Office USE only:**

Deposit Amount: \_\_\_\_\_

Details of Slip: \_\_\_\_\_

Signature of Depositor: \_\_\_\_\_