



Avinashilingam

Institute for Home Science and Higher Education for Women

University

(Estd. u/s 3 of UGC Act 1956)

Coimbatore - 641 043, Tamil Nadu, India

**DEPARTMENT OF CHEMISTRY
REQUISITION FOR TGA / DTA ANALYSIS**

Name and Designation :
Institution and Address :
Department :
Email id :
Telephone Number :
User category : Industry/Lab(PG/M.Phil. Project work/Ph.D. Research work)
Number of samples :
Sample Code :
Analysis Range :
Temperature Range : TGA / DTA
RT to 700°C
Type of output
Hard copy/Soft copy(CD) :

Signature of the Student

Signature of Guide

Signature of the HoD

Date:

List of Charges

Industries (Large/Medium/Small) : Rs - 2750 / Sample
Govt. R&D Labs : Rs - 1250 / Sample
Educational Institutions : Rs - 500 / Sample

Additional charge Rs.50 for postage and CD
DD should be in favor of Registrar, Avinashilingam University.

Payment Details

: Bill No:_____ Amount Paid:_____ Date:_____

(Enclose the copy of payment receipt)

(To be filled by the In-charge)

Sample code: -----

date of receipt of sample:-----

scheduled date of sample analysis:----- **Signature of In-Charge**

For Office use only

1. Name of the researcher
2. Designation and address
3. Contact number
4. No.of samples
5. Name of the Equipment
6. Amount to be paid : Rs.
7. Fee receipt number

Signature of office staff

Date :-----