

REQUISITION FORM
 Central Sophisticated Instrumentation Facility (CSIF)
 BITS PILANI – K. K. Birla Goa Campus
 NH-17B Zuari Nagar – 403726, GOA, INDIA

Laser Micro Raman Spectrometer (Lab RAM HR Evolution)
USER INFORMATION (INTERNAL USERS)

User Name:

Unique ID (UIN):

IMPORTANT SAMPLE INFORMATION (Maybe discussed with operator)

Sample and substrate details	
Expected Peak positions	
Specify if your samples are hazardous, if yes kindly provide MSDS	
Laser line to be used 325nm / 532 nm / 633 nm / 785nm	
Mode of Operation (PL/Raman/Mapping)	
Required Time (hrs)	

PREFERRED SLOT TIMING:-.....

I certify that my samples do not present any danger to the personnel or equipment and I have provided the appropriate handling instructions for safety to the operator before analysis. I hereby declare that no radioactive sample has been forwarded for analysis. I am aware that the Centre has no liability as to any loss/damage of my samples during storage/transport/imaging at the Centre. I accept all the terms and conditions of use and confirm adherence to all rules and regulations of the Centre with regard to sample analysis.

I / We shall acknowledge the CSIF BITS PILANI K K Birla Goa Campus while publishing / reporting the results in journals / conferences or elsewhere.

 (User with date)

 (Supervisor / HOD)

 (Raman operator)