



UNIVERSITY OF MYSORE  
CENTRAL INSTRUMENTATION AND RESEARCH FACILITY  
INSTITUTION OF EXCELLENCE SCHEME

Vijnana Bhavana, Hunsur Road  
Manasagangotri, Mysore-570 006

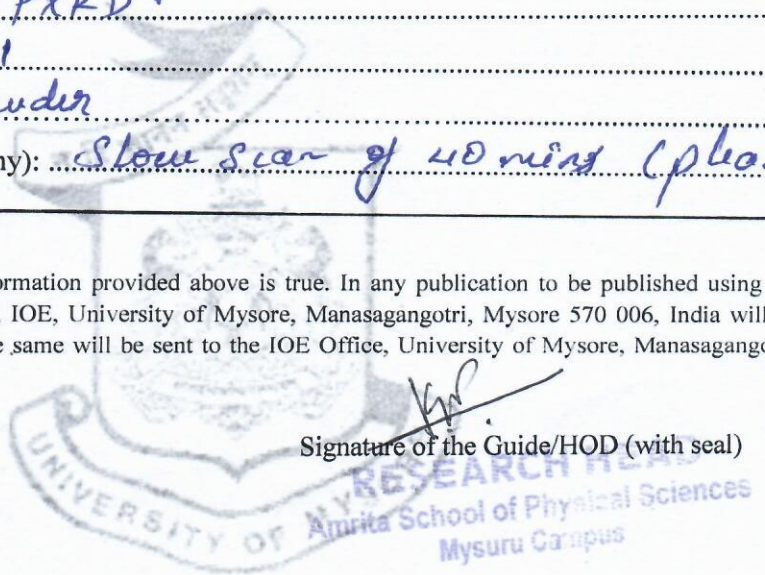
Requisition Form for Instrumentation Facility

Student Name: Bhavana G. Supervisor's Name: Dr. Shiva Prasad K  
Student Designation: M.Sc (Chemistry)  
Department: Physical Sciences  
Tel/Mobile no: 9740520156 Email: Sanjayrajari05@gmail.com  
Address: Amrita Vishwa Vidyapeetham  
Mysuru campus.  
Specification: Slow Scan of 0.02  
Required Date and Time of Usage: 2/4/23 40 minutes of time usage  
Instrument to be Used: PXRD  
Number of Samples: 1  
Type of Sample: Powder  
Special Requirements (if any): Slow scan of 40 mins (please)

**Declaration:**

I agree that all the information provided above is true. In any publication to be published using the results, Instrumentation Facility, IOE, University of Mysore, Manasagangotri, Mysore 570 006, India will be acknowledged and a copy of the same will be sent to the IOE Office, University of Mysore, Manasagangotri, Mysore 570 006, India.

Bhavana G. Gode  
Signature of the Student



[Signature]  
Signature of the Guide/HOD (with seal)