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| **To be filled by users** |
| **Instrument Facility (Name/Code):**  |   |
| **Data required:** |   |
| **Name:** |   |
| **Organization Name:** |  |
| **Address:** |   |
| **Email ID:** |   |
| **Mobile No.:** |   |
| **Category (Tick):** |   | BSIP in-house Project  |
|   | Bonafide Indian Student |
|   | Government Organization |
|   | Private Organization |
|  | Foreign Organization |
| **Number of samples (number/in words):**  |   |  |
| **Details about the samples (Type of sample, Please attach sample list along with the form):** |   |
| **Sample location (Latitude & Longitude):** |   |
| **Additional information, if any:** |   |
| **Signature (with date):** |   |

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| **For office use: (users don’t need to fill this section)** |
| **Date (sample received):** |   | **Date of Analysis:** |  |
| **Sample received by (Name):** |   |
| **Performa invoice no. and amount:** |  | **Payment confirmation details:** |  |
| **Sample details:** |   |
| **Additional note if any:** |   |
| **Signature of concerned person:** |   |  |  |