

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

19-May-2019

Vijnana Bhavana, Hunsur Road  
Manasagangotri, Mysore-570 006

Requisition Form for Instrumentation Facility

Student Name: RASHMI V Supervisor's Name: Dr. K R SANJAY  
Student Designation: Research Scholar  
Department: Department of Biotechnology  
Tel/Mobile no: 9900667699 Email: rashmi4.v@gmail.com  
Home Address: # 155, TN Pura Road, Alanchalli, Mysore-570026  
College Address: SJCE, Dept. of Botech, Mysore.  
Specification: .....  
Required Date and Time of Usage: 13 May 2019.  
Instrument to be Used: Freeze Drier / Lyophilizer  
Number of Samples: 3 x 200 = 600 Re  
Type of Sample: Cellus Samples  
Special Requirements (if any): Not doing freeze drier; Requesting to keep the samples to keep at -80°C / -20°C.

**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.

Signature of the Student

Rashmi V

Signature of the Guide/HOD (with seal)

Dr. K.R.

**Dr. K.R. SANJAY**  
Associate Professor  
Department of Biotechnology

Jayachamarajendra College of Engineering  
Mysore - 570 006