

30-Feb-20

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: Rashmi. V Supervisor's Name: Dr. K. R. Sanjay

Student Designation: Research Student

Department: Dept. of Biotechnology

Tel/Mobile no: 9900667699 Email: Rashmi.A.V@gmail.com

Address: SJCE Mysore

Specification: Callus culture (400 lbs has been paid through online: 174578984)

Required Date and Time of Usage: 12-2-2020

Instrument to be Used: Lyophilizer

Number of Samples: 1

Type of Sample: Callus culture

Special Requirements (if any):

Declaration:

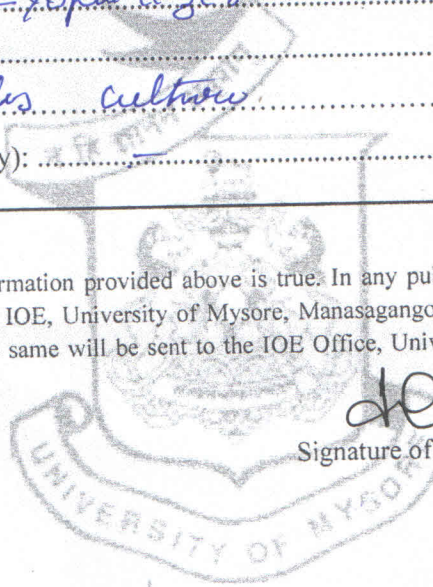
I agree that all the information provided above is true. In any publication to be published using the results, Instrumentation Facility, IOE, University of Mysore, Manasagangotri, Mysore 570 006, India will be acknowledged and a copy of the same will be sent to the IOE Office, University of Mysore, Manasagangotri,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

Signature of the Student

Rashmi. V

Signature of the Guide/HOD (with seal)

Dr. K.R. Sanjay



Dr. K.R. SANJAY
Associate Professor
Department of Biotechnology
J. Jayachamarajendra College of Engineering
Mysore - 570 006