

20-Feb-24



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: ...Shruthi S..... Supervisor's Name: Dr. Siddaramaiah
Student Designation: Research Scholar
Department: Polymer Science & Technology, SJCE, Mysuru
Tel/Mobile no: 9738411298..... Email: shruthi.s.9738@gmail.com
Address: Dept. of PST, SJCE
JSSSTU, Mysuru
Specification:
Required Date and Time of Usage: 15-02-2020
Instrument to be Used: UV Spectrophotometer
Number of Samples: 12
Type of Sample: Liquid
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.

Shruthi S
Signature of the Student

Siddaramaiah 15/2
Signature of the Guide/HOD (with seal)
Professor and Head
Department of Polymer Science & Technology
S. J. College of Engineering
MYSURU-570 006