

C-20-Oct-06



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: ... Namitha S. Supervisor's Name: ... Dr. N.S. Devaki
Student Designation: ... Research scholar
Department: ... Botany
Tel/Mobile no: ... 8277159853 Email: ... namithashivashankar@gmail.com
Address: ... No-1383 80 feet road Vijayanagara 2nd Stage,
..... Mysore
Specification: ... Liquid Nitrogen
Required Date and Time of Usage: ... 15/10/2020 03:30 pm
Instrument to be Used:
Number of Samples: ... 04 ltr
Type of Sample:
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.

Namitha S.
Signature of the Student

Devaki N.S.
14/10/2020
Signature of the Guide/Coordinator (with seal)
3-year Integrated M.Sc. Course in Molecular Biology
Yuvaraja's College, University of Mysore
MYSORE-570 005

