



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: Anun Kumar C. Huded Supervisor's Name: Dr. M.K. Mishra
Student Designation: R-A yd-I
Department: Division of Plant Tissue Culture & Biotechnology
Tel/Mobile no: 954 3612 Email: dh-coffbiotech@gmail.com
Address: Manasagangotri, Coffee Road,
Mysore
Specification: Liquid Nitrogen 20lts
Required Date and Time of Usage: 09-03-2021
Instrument to be Used:
Number of Samples: 20lts
Type of Sample: Plant Tissue
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.

Huded
Signature of the Student

Mishra
Signature of the Guide/HOD (with seal)