



UNIVERSITY OF MYSORE

**CENTRAL INSTRUMENTATION AND RESEARCH FACILITY  
INSTITUTION OF EXCELLENCE SCHEME**

Vijnana Bhavana,  
Hunsur Road Manasagangotri,  
Mysore-570006

**Requisition Form for Instrumentation Facility**

Name: Dr. Arunakumar GS

Designation: Scientist-C

Department: Central Sericulture Research and Training Institute

Tel/Mobile no: +91 9164148616 Email: arunarvind22@gmail.com

Address: MBL-1, CSRTI, Mysore 570008

Specification: Liquid Nitrogen 2 litre

Required Date and Time of Usage: 08-03-2021, 3.00 PM

Instrument to be Used: ...Liquid Nitrogen


Number of Samples: -

Type of Sample:

Special Requirements (if any): ...Nil.....

**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 570006, 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.

 08/03/21  
Dr. ARUNAKUMAR G. S.  
SCIENTIST - C / SCIENTIST-G

Signature (with seal)

UNIVERSITY OF MYSORE  
CENTRAL AGRICULTURAL RESEARCH & TRAINING INSTITUTE  
MOLECULAR BIOLOGY LABORATORY  
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