

21-Mar-162



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

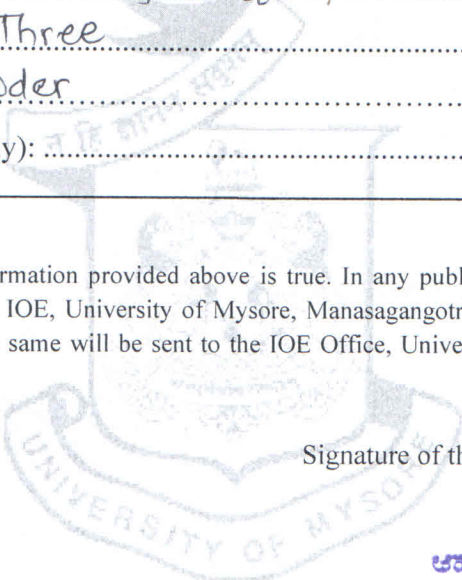
Student Name: Pratflesha Gawali Supervisor's Name: Dr. Ezil Vandan
Student Designation: P.h.d. scholar
Department: Food Protectant and Infestation control, CSIR-CFTRI
Tel/Mobile no: 9884787214 Email: pratfleshagawali13@gmail.com
Address: Dept. of food protectant and infestation control,
CSIR-CFTRI, Mysuru, 570020
Specification: CU-K α X-rays ($\lambda = 1.5406 \text{ \AA}$)
Required Date and Time of Usage: 26-3-2021 ; 11-4 PM
Instrument to be Used: X-ray diffractometer
Number of Samples: Three
Type of Sample: Powder
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.

Pratflesha
Signature of the Student

Brammhi
Signature of the Guide/HOD (with seal) 26/3/21



ಮುಖ್ಯಸ್ಥರು / प्रमुख / Head
ಆಹಾರ ಸಂರಕ್ಷಕಗಳು ಹಾಗೂ ಕೀಟನಿಯಂತ್ರಣ
ಖಾಯ ಸಂರಕ್ಷಕ एवं कीट नियंत्रण