



UNIVERSITY OF MYSORE
CENTRAL INSTRUMENTATION AND RESEARCH FACILITY
INSTITUTION OF EXCELLENCE
 Vijnana Bhavan, Hunsur Road, Manasagangotri, Mysore-570 006

Requisition Form for Imaging Facility

CONFOCAL	LIVE CELL IMAGING	FLUORESCENCE	SEM/STEM <input checked="" type="checkbox"/>
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Student Name: MAITHRI SHANBHOGUE H Supervisor Name: Dr. Shailesh T
 Student Designation: M. Pharmacy
 Department: Industrial Pharmacy
 Tel/Mobile no: 8197130039 Email: maithrishanbhogue@gmail.com
 Category: University of Mysore Other University/Institution Industry

Address: Type IV/10, CSR&TI Staff Quarters, JLB Road, Vidyananyapuram, Mysuru

Specification: 500x magnification

Required Date and Time of Usage:

Number of Samples: 01

Type of Sample: Solid - Microfibers

Special Requirements (if any): images of different field areas with distinct fibers.

Declaration:

I agree that all the information provided above is true. In any publication to be published using the results, Imaging 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.

H. Maithri Shanbhogue
 Signature of Student

[Signature]
 Signature of Guide/HOD (With seal)

Dr. D.V. Gowda, M.Pharm, Ph.D
 Professor & Head
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