

20-01-2020

  
UNIVERSITY OF MYSORE  
**CENTRAL INSTRUMENTATION AND RESEARCH FACILITY**  
**INSTITUTION OF EXCELLENCE**

Vijnana Bhavan, Hunsur Road, Manasagangotri, Mysore-570 006

23

**Requisition Form for Imaging Facility**

CONFOCAL	LIVE CELL IMAGING	FLUORESCENCE	SEM/STEM
----------	----------------------	--------------	----------

Student Name: Manohar M. Supervisor Name: Dr. D.V. Gowda.  
Student Designation: RESEARCH SCHOLAR.  
Department: PHARMACEUTICS  
Tel/Mobile no: 8105494968 Email: manu.mahadev16@gmail.com  
Category: University of Mysore  Other University/Institution  Industry

Address: Dept. of Pharmaceutics, JSS College of Pharmacy, JSS AHER.  
Bannimantap, Mysuru-15.  
Specification: Lyophilized sample, - store below 4°C.  
Required Date and Time of Usage: 23-10-20  
Number of Samples: 02 (Two)  
Type of Sample: Liquid (nano-emulsion)  
Special Requirements (if any): NA.

**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.

Manohar M.  
(15/10/20)  
Signature of Student

Gowda  
Signature of Guide/HOD (With seal)

**Dr. D.V. Gowda, M.Pharm, Ph.D**  
Professor & Head  
Dept. of Pharmaceutics  
J.S.S. College of Pharmacy  
Sri Shivarathreeshwara Nagar