



**CENTRAL UNIVERSITY OF JAMMU**  
CENTRAL INSTRUMENTATION FACILITY  
Rahya Suchani Bagla Samba-181143, J&K, India

**REQUISITION FORM FOR HIGH TEMPERATURE PL**

Email: head.[cif@cuammu.ac.in](mailto:cif@cuammu.ac.in) ; office.cif@cuammu.ac.in

**(Payment should be credit in: Central Instrumentation Facility, CUJ A/c No. 0902040520000032  
IFSC:JAKA0RAHYAA)**

**User Information**

User Type (Please tick as applicable)	:	Central University of Jammu <input type="checkbox"/> other Educational Institutions <input type="checkbox"/> R&D Labs <input type="checkbox"/> Industries <input type="checkbox"/>
Name:	:	
Designation:	:	
Supervisor Name	:	
Research Area	:	
Department & University / Institution/College	:	
Billing Name & Address	:	
Phone/ Mobile Number	:	
E-mail Address	:	

**Sample Details**

No. of Samples\* :  
Sample ID\* :  
Temperature Range\*:  
Fixed Laser Excitation source\*: 405nm  
Nature of sample : Explosive/Toxic/Hygroscopic / Light-Heat-Air sensitive  
**Sample requirement: Min. (1-5mg) in the form of fine powder**

Sample Type: Powder

**Payment Details**

Amount paid:.....Draft No/Transaction ID.....Dated:.....

**Recommendation from Head of Department**

The above samples may be accepted on the behalf of our department/ Institution

Signature of user

Supervisor's Signature

Signature of Head of Department  
With official Seal

**For office use only**

Payment received vides receipt no. ....DD/cash.....Dated.....Amount: .....

Job No. / Ref No. \_\_\_\_\_