



No:

Date:...../...../.....

University of Kerala
X-RD Laboratory (DST-PURSE)
Kariavattom Campus, Trivandrum-695 581
X-Ray Diffractometer Request Form

Name: .....

Address: .....

.....

.....

E-mail: ..... Mobile: .....

Number of samples: Powder XRD: GI XRD :

Chemical formula: Toxic: Yes/No

Scan Angle: From ----- To -----.

Step Size:

Category

[ ] KU Departments (A) [ ] Colleges Affiliated to KU (B) [ ] Other Academic Institutes (C)

[ ] Other R&D Institutions (D) [ ] Industry (E)

Mode of Payment: DD/Cash Receipt No. & Date:

Signature lines for Applicant, Supervising teacher, and Head of Institute/Dept.

For office Use Only

Please collect Rs: í .....(In words í ..... )
being the analysis charge for í ..... samples under the í ..... Category.

Faculty in charge

Approved/Not approved

Lab In-Charge

**Charges for XRD facility: (UONo.Ad F1/PURSE/2011 dated 08.01.2015)**

Operational modes	University Departments	Colleges Affiliated to university of Kerala	Other Educational Institutes	Research Institutes	Industries
Powder XRD:	300	500	1000	1500	2000
GI XRD:	500	800	1500	2000	3000

Note:

All payments are to be made under the head KUF-Miscellaneous (XRD) at the university cash counter. DD should be addressed to Finance Officer, University of Kerala, payable at SBT University Campus, Thiruvananthapuram.