



No:

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

University of Kerala
Sophisticated Instrumentation and Computation Centre (SICC)
Kariavattom Campus, Trivandrum-695 581 Phone: 0471-2308566
E-mail:siccuok@gmail.com

Name:

Official Address:.....

Designation: Department:

E-mail: Mobile:

Category: Kerala University Students (A) Students from colleges affiliated to UoK (B)
 Students from other Educational institutions (C) R & D institutes (D)
 Industry (E)

Mode of Payment*: DD

Receipt No*.::

Date:

Certified that the sample submitted belong to the user mentioned above. I agree to acknowledge the usage of the facility in all publications arising out of the usage of the SICC. The details of publications will be intimated to the SICC. The samples may be accepted on the behalf of our department/ Institution

Date:

.....

Name and Signature
of the Head of the Institute/Dept.
(Office Seal is mandatory)

Important:*

- *Partially filled form and form without office seal will be summarily rejected*
- *Each page should be printed separately for submission*

Office Use only

Sample Received on:

Number of samples :

Analysis for :

Amount :

Purpose :

Name and Signature
Of the authority

SPM Analysis Request Form

Name:

Address:

.....

E-mail: Mobile:

Number of samples* (AFM):..... Other Mode (if any):

Sample Type:

Only Dry samples in the form of thin film, powder, pellets, sheet..Etc is only acceptable.

Required measurements/Mode

i) **AFM Image** :
(Contact, non contact...etc)

ii) **Other mode** :
(MFM, C-AFM...etc)

.....
Name and Signature
of the Applicant

.....
Recommendation of
supervising teacher
(For researchers of Kerala University departments)

.....
Name and Signature
of the Head of the Institute/Dept.

Important

- i) **Mandatory fields should not have kept blank**
- ii) **Sample containers should be uniquely identified and appropriately labeled**
- iii) **Please provide the information about any specific sample preparation method required, chemicals to be used, range of instruments to be used, any literature or past analytical experience**
- iv) **Please specify nature of your sample, if your submitted sample contain toxic/ flammable/ hazardous component, please attach material safety data and other details (if any) along with the sample.**
- v) **Partially filled form and form without office seal will be summarily rejected**