



No:

Date:

University of Kerala
Central Laboratory for Instrumentation and Facilitation (CLIF)
Kariavattom Campus, Trivandrum-695 581 Phone: 0471-2308566
E-mail: siccuok@gmail.com

Name:

Official /Billing 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) ☐

Purpose: Ph.D. ☐ M.Sc. ☐ M.Phil. ☐ Others ☐

Mode of Payment*: DD

Receipt No*.:

Date:

Certified that the sample submitted belongs to the above-mentioned user and using of CLIF facility will be acknowledged in all the publications arising out of the results of the analysis.

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*
- *The complaint if any regarding the analysis result has to be intimated within 10 days on receipt of the result*
- *The leftover/analyzed samples shall be collected within 2 weeks from the date of issue of result*

Office Use only

Sample Received on:

Number of samples :

Analysis for :

Amount :

Name and Signature
Of the authority

PCR Analysis Request Form

Name:.....

Official Address:.....

.....

Email:Mobile:.....

Analysis Information

Experiment type: - Standard curve ☐ Relative Standard Curve ☐

Melt Curve ☐ Comparative $C_T, \Delta \Delta C_T$ ☐

Chemistry (Reagent Information): -

Process Details: -

Process	Temperature (0 ^c)	Time (s)
Initial Denaturation		
Denaturation		
Annealing		
Extension		

.....

**Signature of the
Applicant**

.....

**Recommendation of the
supervising teacher**

.....

**Name and signature of the
Head of the Institute/Dept.**
*(For researchers of Kerala
University departments)*

Important

- i) All fields are Mandatory and should not have kept blank.
- ii) Sample should prepare and bring as per procedure.
- iii) Sample containers should be uniquely identified and appropriately labelled.
- 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) If the leftover/analysed sample is required, please mention in the form itself.
- vi) Partially filled form and form without office seal will be summarily rejected.