National College Instrumentation Facility (NCIF)		E-mail: ncifpayment@mail.com Contact No.: 81222 96999		
Tiruchirapalli - 620	001, Tamil Nadu, India.	DATE:		
, , , , , , , , , , , , , , , , , , , ,	redited at "A" Grade by NAAC) ntial for Excellence)	Registration No.:		
	User Registration For	m		
1. Name:	2.	Research Area:		
3. Address:				
4 Contact Number				
6. Specify the appropriate ca	tegory below:			
Research Scholar /	P.I., in a Research Project.	Ph.D. Scholar , with fellowship		
Research scholar / S	Student, without Fellowship	Teacher / Research Staff		
7. Details of the samples (Na	ture/Composition/ Organic/Inorganic/m	nelting pt./boiling pt., any other).		
8. Facilities to be used:				
SEM HPLC Hardness Tester	SEM with EDAX	GC-MS AAS PXRD UV-Vis FT-IR TGA Flourescence Spectrophotometer	PSA A / DSC	
9. Number of samples:				
10. Parameters to be measu	red:			

Certified that (a) the sample(s) to be measured are part of my research work, (b) the samples submitted are non-toxic / non-hazardous, and do not require any special precaution(s) while handling.

"I/We agree to acknowledge the National College Instrumentation Facility (NCIF), National College (Autonomous), Tiruchirapalli, Tamil Nadu, India, in my / our publications and thesis, if the analytical results are incorporated / used therein."

Signature of Supervisor / Head of Department / Institute with Seal

Signature of User

For Departmental Office Use Only						
No. of Samples	Rate (Rs.)	Postal / CD charges (Rs.)	Total charges (Rs.)	Signature		

Note: Results are provided in CD only. Please submit a blank CD with samples. For Departmental Office Use Only

For Fee Counter Use only

Payment received (Rs.)	DD / Cash, and Date	Signature
	Payment received (Rs.)	Payment received (Rs.) DD / Cash, and Date