

**DBT-MSUB ANALYTICAL TEST FACILITY
SCHOOL OF BIOSCIENCES
MAHATMA GANDHI UNIVERSITY KOTTAYAM**

Sample submission form for FT-IR / ATR Spectrometry

Name of the student :	
Name of the Supervisor :	
Mailing Address :	
Phone :	
Email :	

1. No. of Samples :
2. Sample ID :
3. Type of Sample : Solid / Liquid / Gas (only for IR)
4. IR / Raman :
5. Type of Analysis for IR : Transmission / Diffuse Reflectance / ATR /
Specular Reflectance / High Temperature(HTHP)
6. Temperature range (only for HTHP) :
7. Raman : Powder sample / Films / Liquid
8. Expected Positions (in cm^{-1}) :

Any other information

Declaration

DBT-MSUB will be duly acknowledged in the publications containing the results obtained using the test facilities

Signature of the supervisor

Signature of the student

Name:

Institution/Department:

Date:
