DST-MSUB ANALYTICAL TEST FACILITY SCHOOL OF BIOSCIENCES MAHATMA GANDHI UNIVERSITY, KOTTAYAM

Sample submission form for Trinocular Fluorescence Microscope

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	
4. Type of Analysis :	
5. Excitation wavelength:	
6. Further information about the samples :	
7. Other details necessary for analysis or observation :	
Any other information	
Declaration	
DBT-MSUB will be duly acknow ledged in the publications containing the	
results obtained using the test facilities	
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Signature of the supervisor	Signature of the student
Name:	
Institution/ Department:	
Date:	