

**Dr. APJ ABDUL KALAM CENTRAL INSTRUMENTATION LABORATORY
GURU JAMBHESHWAR UNIVERSITY OF SCIENCE & TECHNOLOGY, HISAR**

(Phone: 91 1662 263352)

Ref. No.

Dated:

Name of Instrument/Equipment _____

Name of Applicant _____

Applicant Father Name _____

Roll No./Reg. No. _____

Research Supervisor's Name _____

Department _____

College/Institution/University/Industry _____

Postal Address _____

Pin _____ State _____

Phone/Mobile No. _____

Email _____

No. of Samples _____

Sample Codes/with other details
(Including solvents/sample solubility) _____

Nature of Sample (Solid/Liquid) _____

Sample is Health Hazardous Yes / No

Sample is Explosive Yes / No

Note: Write Required Element for Elemental Analysis (FESEM) _____

The Charges are payable online through university website <http://www.gjuonline.ac.in>

Note: Charges are not refundable at any cost.

Amount paid Rs..... Payment ID Payment Date.....

Token No. Date.....

Name of Invoice in favour:

Institute GST No.

Signature of the Supervisor

Signature of Applicant

Director
(CIL)

Chairperson
(with seal)