



Department of Chemistry School of Energy Technology

Powder X-Ray Diffractometer Requisition Form (For PDEU internal users ONLY)

Applicant & Sample details:								Date:		
Name of Applicant:										
Enrolment No.:				Course:			Conta	Contact No.:		
Email ID:										
Schoo	Department:									
No. o	Nature/Type of sample:									
Toxicity details (As per MSDS)										
Eleme	ples:			Samp Samp	e disposal O Recover d: O Disposal					
Type of analysis: Regular SAX (Small Angle X-Ray)										
Justification for SAX analysis:										
Sr. No.				Start om (26	θ)	To End (2θ)Other remarks for samp		imple		
1										
2										
3										
4										
							Signatu	Signature of XRD In-Charge		
Si	gnature of	Signature of Supervisor (with da				th date	Prof. (Dr.) Rajib Bandyopadhyay Signature of HoD			
								51		
For office use only Prof. (Dr.) Manoj Panday									Dr.) Manoj Panday	
Analysis Date:						Analyst Name:				
Sample Inward entry No.					Analyst Signature:					

Note: Please book your analysis slot at least before a week. Please bring New fresh CD for data collection.