**Indian Institute of Technology Ropar**

**Sample Analysis Form**

**(Internal Users)**

Name of User …………………………………………………………………….

Name of the supervisor/HoD …………………………………………………………………….

Institute / Department …………………………………………………………………….

Name of the Equipment/Instrument …………………………………………………………………….

Department/Lab …………………………………………………………………….

(Please refer Equipment Specification Form)

**Sample Details**

**(Please check Annexure I for Technical Specifications)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sr. No** | **Details of the Sample** | **No of Samples** | **Sample Charges (per Sample)** | **Gross Amount (Rs)** |
|  |  |  |  |  |

Affiliation (Please tick/ strike which is not applicable)

|  |  |
| --- | --- |
| **Institute Budget { }** | **From any other source Scheme / external projects within the Institute { }** |
| Budget Head: ……………………Noted in budget Sheet vide sr. no……………….. dated……………..(No GST will be charged. Only respective budget will be reduced with sample charges as applicable) | Scheme / Project No …………………………….Principal Investigator ……………………………..(No GST will be charged. Applicable Sample Charges will be deposited in “IIT Ropar Revenue Account, A/c No. 37360100716, IFSC-SBIN0013181, Rupnagar (Punjab) |
| **Dealing Assistant Supervisor HoD** | **Dealing Assistant PI** |

Additional information (if any) …………………………………………………………………….

 …………………………………………………………………….

**Signature of user**

**Lab. Assistant Signature of Instrument in Charge**

**Note- Forward form to Accounts section immediately preferably within 05 days**

 **For use by Accounts Section**

Amount credited in respective Equipment/Lab of Service Provider department vide Sr no \_\_\_\_\_ dated\_\_\_\_\_\_\_

**Dealing Assistant JAO/AO AR/DR (Accounts)**