

DEPARTMENT OF PHYSICS CONSULTANCY CELL, RASHTRASANT TUKADOJI MAHARAJ NAGPUR UNIVERSITY, NAGPUR

Request Form for Materials synthesis Laboratory facility

Date:				
Name:				
Address:				
Email:				
_	Conditions for synthesis:			
1. 2.				
Number of Samples:				
Details of samples:				
Category (please tick whichever is applicable):				
	6 Department of Physics and other epartment of RTMNU		*Charges per sar GST	mple: Rs 1000 /- per day + 18%
	ther Educational Institution, affiliated olleges and ex-students of RTMNU		Charges per sam	ple: Rs 1000 /- per day + 18% GST
• R 8	& D Labs		Charges per sam	ple: Rs 4000 /- per day + 18% GST
• Ind	dustries		Charges per sam	ple: Rs 5000 /- per day + 18% GST
Payment Transaction Receipt No:				
Signature of the applicant Name, Signature and seal of HOD/Principal/Guide/Supervisor/Managing Director				
Consultanc		f Coordinator y Cell	Signature of Head, Department of Physics	
For office use only: Date of analysis: Invoice number dated:				