



**CENTRE FOR INSTRUMENTATION AND MAINTENANCE FACILITY (CIMF)
PERIYAR UNIVERSITY, PERIYAR PALKALAI NAGAR, SALEM-636 011, TAMIL NADU, INDIA**

JOB REQUISITION FORM

Date: _____

To

The Director, CIMF

Name of the Department / Centre / Section :

Name of the User :

Ph. / E-mail Communication : Ph No: _____ E-mail: _____

ELECTRONICS NEW FABRICATION / SERVICE:

Name of the Instrument :

Make / Model No. :

Defects observed :

• Service Manual provided :

Spares / Materials supplied :

New design / Attachment Module / Unit :

Name of the instrument to be fabricated :

***ANALYTICAL MEASURING / TESTING**

No. of Samples :

Code No. :

Media, Solvent :

Region / Range

(In case of NMR Solubility should be checked)

Remarks : NMR / UV / FTIR / XRD / TEM / SEM

* *Details of Publications, if any :

***MECHANICAL / GLASS BLOWING SHOP:**

Description the job / Fabrication of Instrument :

❖ Expenditure to be met from Project / University Funds (kindly specify)

Bill / Receipt in the name of

Signature of the User

Signature of the Head / Co-ordinator of
the Dept. / Section with
Office seal

* This facility is not available now.

** Acknowledge analytical services tendered by CIMF in all your publications / thesis.

- Service Manual is essential for high-tech and sophisticated instruments minimum charge will be Collected for any work"

Sketches / Drawings should be given in a separate sheet"

❖ Kindly specify the detail of the project, (Title, duration and name of the principal investigator, funding agency)

FOR THE CIMF USE ONLY

Job / Work order No. I :
Job order received on :
Instrument / Sample / Materials received on :
Work / Test / Job completed by :
Job completed on :
Spares / Components provided by the User :
Spares / Components replaced by CIMF :
Nature of work :
Total Hours worked :
REMARKS : Charges: Rs.

Signature of the Technical Staff

Technical Officer

Signature of the Director

FOR OFFICE USE ONLY

Name of the Lab :
Bill sent on : Bill No. & Date:
Payment Details : Receipt No &. Date:
Cash / Cheque / Number & Date
Received on :
Spectra / Job / Instrument to be sent to :
Spectra / Job Instrument dispatched on :
vide office letter No.

ACKNOWLEDGEMENT

The Spectra / Job / Items / Instrument are received in good condition on _____

Signature of the receiver

Name: