



**Spectrofluorometer Facility Request Form**

Name of Applicant:

Department/ Institution:

Email:

Phone:

No. of sample(s) with codes:

Nature of Sample(s): Inorganic/Organic/Polymer/Biological/Food etc

The following per sample rates apply.

Experiment / Activity	Results / Data	Charges per Sample (Rs.)		
		Chemistry Department	Other IUB Depts.	Commercial / Other Institutes
<b>Fluorescence Studies</b>	Data Collection	<b>500</b>	<b>1000</b>	<b>3,000</b>

**Payment Details:**

All payments should be made through Bank challan/online HBL in A/C 14730000010403 or pay order in the name of the Treasurer, The Islamia University of Bahawalpur.

Challan/Pay Order/Draft/Transaction No: (Original attached)

Date:

Total Amount in Figures:

(in Words):

**Requests under HEC program should come through proper channel.**

**Declaration:**

1. Any publication or thesis carrying the results of this study shall acknowledge stating “*the fluorescence studies were conducted at The Materials Chemistry Laboratory, The Islamia University of Bahawalpur*”.
2. A co-authorship will be provided in research publications based on this analysis.

Signature (Student)

Signature (supervisor and stamp)

..... **For Official Use**.....

Date of Receipt:

MCL Code:

Date of Analysis:

Research Assistant: Spectrofluorimeter

Lab Incharge:

For further assistance in data interpretation, please feel free to contact us.