

NAME OF THE USER:

NAME OF THE DEPARTMENT(S)(for internal use):

# **CENTRAL INSTRUMENTATION FACILITY(CIF)**

### **UNIVERSITY OF SCIENCE & TECHNOLOGY, MEGHALAYA**

PA Sangma International Block, Techno City, Killing Road, Baridua 9th Mile

Meghalaya-793101

### REQUISITION FORM FOR HEMATOLOGY ANALYZER

NTACT D	ETAILS:		
ONE/MOE	BILE NO-		
AIL ID-			
MPLE INFO	ORMATION:		
S. No.	Sample ID	Type of Vacutainer Used	Remarks
			_

APPLICATION FORM No(to be filled by CIF Office)- USTM/K/CIF/2022/

## **DECLARATION**:

a.	To be filled by the applicant:
	I hereby, declare that
	the publication of this analysis in Research paper (Journal/Magazine/ Conference Proceedings
	etc), Report, Thesis will be duly acknowledged and a copy of that will be sent to CIF, USTM.
Dat	te: Signature of the applicant:
b.	To be filled by the PI/Supervisor/HoD/Principal:
	Dr./Mr./Ms is hereby forwarded to use
	the instruments facility for above mentioned sample analysis in CIF, USTM and he/she will be
	abide by the rules and regulations of CIF, USTM.
	Name of the PI/Supervisor/HoD/Principal:
Dat	te: Signature of the PI/Supervisor/HoD/Principal:
c.	Recommendation by the Academic Registrar (USTM) / the Director(CIF):
	The applicant is hereby permitted to use the instrument facility sought for.
Dat	te: Signature of the Academic Registrar(USTM)/Director(CIF):
d.	To be Filled by the Instrument Operator:
	a. Time and Date of Analysis:
	b. Results of sample(s) analysis are provided to the applicant on
Dat	te: Signature of the Instrument Operator:

#### Charges for Hematology Analyzer(HA) services:

		Service Charge in INR				
		Sample charge for	Sample charge for	Sample charge for	Sample charge for	Internal/USTM
		educational Institute	educational Institute	govt. institution	industry	
Instrument	Charge	of north east	of outside north-east			
	basis					
HA	Per	200+18%GST(extra)	300+18%GST(extra)	400+18%GST(extra)	500+18%GST(extra)	100+18%GST(extra)
	Sample					

Sample charges have to be paid in advance. Payment Mode:

- a. Demand Draft: in favour of "University of Science and Technology, Meghalaya",
   Payable at "Guwahati",
- b. Cheque: In favour of "University of Science and Technology, Meghalaya",
- c. Online Payment: A/C No: 4652000100055493, IFSC Code: PUNB0465200

  Bank Name: Punjab National Bank, Bank Address: Six Mile Branch, Guwahati

#### Note:

- i. Before making payment, kindly clear all queries about sample from the corresponding Instrument
- ii. Before submitting the samples for UV-VIS analysis, kindly confirm the date and time with the In-Charge of the CIF.
- iii. Any specific consumables required for particular sample preparation/analysis has to be arranged by the user.
- iv. Sample charges to be paid in favour of –
   University of Science & Technology, Meghalaya
   Techno City, Killing Road, Baridua, 9th Mile
   Meghalaya-793101
- v. Separate form has to be submitted for different category of samples and analysis.
- vi. GST of 18 % on instrument usage charge has to be added extra as per govt regulation.
- vii. No further analysis will be carried out if not acknowledge duly.
- viii. **NO REFUND** in case of technical glitches with instrument. Only adjustment of fees permitted on re-use of the Instrument