



# GLA UNIVERSITY, MATHURA

## CENTRAL INSTRUMENTATION FACILITY

### SERVICE FORM

**(A) Personal Details**

<b>Name</b>			
<b>Designation</b>			
<b>Department</b>			
<b>Institute/Industry</b>		<b>Private/ Govt:</b>	
<b>Complete Address</b>			
<b>Email Id</b>			
<b>Contact Details</b>			
<b>Other Specific Information (If any, please mention)</b>			

**(B) Sample Details**

Date of Booking:				Number of Samples:	
S. No.	Sample Code	CIF Centre Name & Facility No	No of Hours/Runs	Nature of Sample Given (Solids/Powder/hazardous/Magnetic/Volatile)	Specific Findings Details
1					
2					
3					
4					
5					
6					
7					
8					

**(C) Any Additional Information About Sample (If Yes, Please Mention):**

.....

.....

**(D) Payment Details:**

The payment must be made in advance through **BANK DRAFT/NET BANKING/NEFT** payable to the “**CONSULTANCY A/C GLA UNIVERSITY**”.

**Bank: Indian Overseas Bank**

**Account No.: 199901000009038**

**IFSC Code: IOBA0001999**

**Branch: GLA University, Mathura**

**Please fill the details of payments as below**

Name: .....

Bank Name: .....

Bank IFSC No: .....

Payment Date: .....

Bank Reference Number: .....

Total Payment against Service/Services: .....

**DECLARATION BY USER**

1) I/We, Mr./Ms./Dr. .... hereby confirm that I/We am/are fully aware of the rebate policy of the CIF available at GLA University, Mathura. I/ We will appropriately acknowledge the Central Instrumentation Facility (CIF) at GLA University, Mathura in their research work/ research publications/thesis/oral presentations.

2) I/We declare that I/We abide by all the rules and regulations of the CIF, GLA University, Mathura.

3) Any changes in the material sample and their behavior will be properly informed to the respective centre positively.

**Applicant Name & Signature**

**Supervisor Name & Signature**

**FOR OFFICE USE ONLY**

<b>Centre Name</b>			
<b>Date of Testing</b>			
<b>No of Sample Tested</b>			
<b>Experiment Conduct by</b>			
<b>Lab in Charge</b>		<b>Lab Name</b>	
<b>Entry Record No.</b>		<b>Results Provided: Y/N</b>	
<b>Net Charge (Rs.)</b>			

**Name & Signature of Centre In-Charge**