



INDIAN INSTITUTE OF TECHNOLOGY PATNA
DEPARTMENT OF CHEMISTRY
 Bihta , Amhara Road, Patna – 801106, India; Phone +91-612 3028225

Sample submission form

Date:

To
The HoD(Chemistry Department)
IIT Patna, Bihta Amhara Road
Patna-801106

Subject: Usage of Spectrofluorimeter (Horiba, Fluoromax-4)

Name :
 Designation :
 Address for communication :
 Phone number :
 Email Address :
 DD No..... Date..... Amount Bank.....

Certified that the sample submitted belong to the user mentioned above.

Signature of Guide with date & Seal

Signature with date & Seal

(HOD/Principal/Managing director)

Sample information Emission wavelength
 Excitation wavelength

No of Sample &Sample ID:	
State of the sample(solid/liquid)	
Total number of emission/excitation spectra	
Scan range	
Air sensitive(Y/N)	
Composition/nature of sample: (please provide complete information)	
Solvent required :	

Charges for the measurement should be sent through an advance Demand Draft in favour of 'IIT Patna' payable at 'Patna' along with the sample or through RTGS/NEFT(Please mention A/c holder name....., A/c No.....,Bank name.....,IFSC code.....) to HOD, Chemistry Dept., IIT Patna (Please attach a copy of the transaction details along with signature of guide with date and seal)