BAJAJ COLLEGE OF SCIENCE
CIVIL LINES, WARDHA-442001
CENTRALISED INSTRUMENTATION CENTER (CIC)

Email: instrumentation.bcs@gmail.com Ph: 07152-230515, 243851, 255070 (Office)

REQUISITION FORM POLYMERASE CHAIN REACTION

User Information

Name (In Block Letters) :	
Designation:	
Name and Address of the Institute:	
Research Area:	
Department & University/ Institution/College:	
Phone/ Mobile Number: E-mail Address:	
Billing Name & Address:	
User Category :	**Student/ Research Scholar/Faculty/ Industry Expert/ Others**

Sample Details

No. of Samples :	**Sample Type:**
Sample ID :	**Name of sample/s :**

- ***Sample requirement: 20 ml gel***
- ***Please bring a CD in case a soft copy of result is needed.***

Amount paid: ……
Draft No/ Online Transaction No: ……..
Dated: ……..
Draft to be made in the name of Principal, Jankidevi Bajaj College of Science, Wardha
……
.

For office use only

Payment received vides receipt no.……
DD/cash……Dated…….
Amount: …….
Job No. / Ref No._____

Recommendation

The above samples may be accepted for the analysis.

Signature of Instrument Expert Signature of CIC Incharge Signature of Head of Institute
With official Seal