

SHIKSHA MANDAL's
BAJAJ COLLEGE OF SCIENCE, WARDHA (AUTONOMOUS)
 CIVIL LINES, WARDHA-442001
SOPHISTICATED ANALYTICAL INSTRUMENTATION FACILITY(SAIF)

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

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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 Guardian

Signature of SAIF Incharge

Signature of Head of Institute
With official Seal
