**Requisition form for using Cytation at INST**

*(For Internal Users)*

**INST Lab**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | |  | |
| **Date** | |  | |
| **Designation** | |  | |
| **E-mail and telephone number** | |  | |
| **Number of samples** | |  | |
| **Sample details** | |  | |
| **Experiment to be performed** | |  | |
| **Dyes to be used** | |  | |
| **Specify if your samples are hazardous** | |  | |
| **Authorization Data** | | | |
| **Name of** | | | **Signature** |
| **Requisitioner** |  | |  |
| **Supervisor** |  | |  |
| **Signature**  **(Faculty-In-charge)** | | | |
| **Allotted to Operator’s Name**  **Slot timing:** | | | |
| **Remarks:**  **Signature**  **(Operator)** | | | |

**Note: Please consult the operator before preparing the samples:**