**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:**