



Analytical Service Requisition Form
Centre for Advanced Research in Sciences (CARS)
University of Dhaka, Dhaka-1000, Bangladesh

E-mail: cars@du.ac.bd, Fax: +88-02-9667222, Website cars.du.ac.bd

| | |
|-------------------------------------|---|
| Name of Teacher/Person | Prof. Dr. Sitesh Chandra Bachar |
| Department/Institute/Address | Clinical Pharmacy & Pharmacology, DU |
| Date of Requisition | 2024-07-14 |
| Laboratory | Food and Nutrition Research Laboratory (Contact with Lab In-Charge) |
| Service Name | Antibacterial assay (per bacteria) |
| Sample ID | S1, S2, S3 |
| Sample Name | S1=Azadirachta indica, S2= Morus alb, S3= Annonia squamosa |
| Number of Samples | 3 |
| Name of Elements | Plant leaf of Azadirachta indica; (???), Morus alb; (???), Annonia squamosa; (???) |
| Purpose | PhD Thesis |
| Category for Billing | Category A: DU Teachers and Students doing M.S./M.Phil/PhD under D.U |
| Cost | Tk. 3000 |
| Student/Person | Dr. Md. Shakil Akhter |
| Mobile No | 01726262214 |
| Email | drshakil71@gmail.com |
| Submission Date | 2024-07-14 |

Signature of teacher/person requesting the service: -----

I hereby declare that I do/do not receive any foreign/local funding for my research (strike off as applicable).

Signature of teacher requesting the service -----

Recommendation from concerned chairman/director

I hereby attest the above declaration and recommend that the above analysis be billed under category -----

Name and Signature of Chairman/ Director (with seal): -----

Department/Institute: -----

Date:

(For use by the CARS):

Requisition book entry serial & date:
Date (s) analyses performed:
Total number of samples done:
Analysis log book entry serial & date:

Chief Scientist/Principal Scientist/Senior Scientist/Scientist/Analyst

Calculation of Bill: -----

Bill number: ----- Date: -----

Principal Accounts Officer