



Requisition Form for Scanning Electron Microscope (SEM)
Centre for Advanced Research in Sciences (CARS)
University of Dhaka, Dhaka-1000, Bangladesh

E-mail: cars@du.ac.bd, Fax: +88-02-9667222; Form is available at

Name of Teacher/Person	Dr. Imtiaz Ahmed
Department/Institute/Address	Electrical and Electronic Engineering
Date of Requisition	2024-06-30
Laboratory	Basic Facilities and Sample Processing Laboratory
Service Name	XRD (Crystalline/Amorphous powder)
Sample ID	CNBC01 and CNBC02
Number of Samples	02
Sample Type	Biological
Sample Nature	
If the sample Contains Moisture or Volatile Org. Solvent (VOS)	
Sample stability	
Sampling Technique	
Measurement Type	
Information Required	
Magnification	
Particle Size	
Category for Billing	Category A: DU Teachers and Students doing M.S./M.Phil/PhD under D.U
Cost	Tk.
Student/Person	Dr. Imtiaz Ahmed
Mobile No	01712782833
Email	imtiaz@du.ac.bd
Submission Date	2024-06-30

- a. Please note that Pen-drive is not allowed to transfer data from SEM. A blank CD has to be provided with the requisition form if electronic files of the SEM images and EDX spectra are requested. The electric power of the PC interfaced with the SEM is used from the basic unit and for electronic data transfer too the main unit has to be powered on. Any request for data transfer made later will require separate requisition and will be charged separately.

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