



## X-Ray Analytical Service (XRD) 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; Form is available at

X-ray equipment: RIGAKU Ultima IV X-ray Diffractometer

|   |   |  |
|---|---|--|
| <b>Name of Teacher/Person</b>   | : | Md Abdullah Sayem  |
| <b>Department/Institute/Address</b>                                   | : | Physics  |
| <b>Date of Requisition</b>  | : | 2024-09-30   |
| <b>Laboratory</b>   | : | Basic Facilities and Sample Processing Laboratory                    |
| Service Name  | : | XRD (Crystalline/Amorphous powder)                                   |
| <b>Sample ID</b>  | : | Fe3O4 S1   |
| <b>Number of Samples</b>  | : | 1  |
| <b>Sample Type</b>  | : | Composite Material   |
| <b>Sample Composition</b>   | : | Fe3O4 Nanoparticles  |
| <b>Sample Nature</b>  | : |  |
| <b>If the sample Contains Moisture or Volatile Org. Solvent (VOS)</b> | : | Not sure   |
| <b>Sample stability</b>   | : | Air and moisture stable  |
| <b>Sample amount / size</b>   | : | Not less than 500 mg   |
| <b>Scan range (2-theta<math>\theta</math>)</b>                        | : | 10 <sup>0</sup> -70 <sup>0</sup>                                     |
| <b>Step/min</b>   | : | Standard (3 degree/minute)   |
| <b>Submit Date</b>  | : | 2024-09-30   |
| <b>Category for Billing</b>   | : | Category A: DU Teachers and Students doing M.S./M.Phil/PhD under D.U |
| Cost  | : | Tk. 1000   |
| <b>Student/Person</b>   | : | M Hasanujjaman   |
| <b>Mobile No</b>  | : | 01521522639  |
| <b>Email</b>  | : | mhasanujjaman713@gmail.com   |

- a. Please note that Pen-drive is not allowed to transfer data from XRD. A blank CD has to be provided with the requisition form if electronic files of the XRD data is requested.

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 chariman/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:

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**(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