

Analysis Requirements:

Number of sample submitted: _____

Wavelength: From _____ nm to _____ nm Scan Interval: _____ (If Scan Interval is not mentioned it will be considered as 1)

Declaration:

1. A copy of the resulting publication, if any, will be sent to Co-ordinator, DST-PURSE PROGRAMME, Mangalore University, Mangalagangothri- 574199.
2. Each publication shall carry the following acknowledgement: "This Work (part of this work) was performed at DST PURSE Laboratory, Mangalore University, Mangalagangothri". In addition, if we receive help for analysis data from instrument incharge, the same will be acknowledged suitably, either in the form of acknowledgement or by providing co-authorship.

Signature (Candidate)

Signature and Seal (Supervisor)

*Signature and Seal
(Chairman/ Head of the
Department)*

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Accepted date	Operator	Payment details	Comments

Signature (Scientific Officer)

Signature and Seal
(Coordinator)
