

NATIONAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH

Sector-67, S.A.S. Nagar, Mohali.

Central Instrumentation Laboratory

Service Request Form

DSC - Diamond

		Form No	
Name		Date	
Department		Name of Faculty/Guide	
Institute / Industry			
Complete Address			
Email address		Mobile No	

S. No.	Sample Code	Degradation / Decomposition Temp.	Melting Point	Initial Temp	Heating Rate	Final Temp	Cooling Rate	Final Temp.	Total Time
1									
2									
3									
4									
5									

Analysis will be done only up to degradation temperature

Maximum limit 5 samples per requisition form (Strikeout blank lines).

Sample quantity required is 5 mg

Any Sample preparation protocol			
Nature of Sample	Lachrymatory, Explosive, other		
Storage Temperature			
Any Additional Information	Any Solvent Used		
Nature of Compound (Please tick)	Crystalline		Amorphous

Signature of Authorized Person

For Office Use (Internal / Outside Samples)

Date of sample received	Date of sample analyzed	Date of results delivered	Log Book Entry No.	Analyst

For Outside Sample(s)

Date	Receipt / Invoice No.	Amount (₹)