



**Central Research Facility Centre**  
**National Institute of Technology Srinagar**

Email: [crfc@nitsri.net](mailto:crfc@nitsri.net) Website: <http://nitsri.ac.in>

**Rigaku Wavelength Dispersive X-ray Fluorescence**

**Requisition Form**

Name:	Designation:
Contact No:	Email ID:
Name of the Supervisor:	Department:
No. of Samples:	Payment Details:
Organization / Institute:	Date:

***Details of the samples***

Sample Code	Nature of Sample Solid/Liquid/ Powder	Possible elements	Remarks

Note:

\*Minimum 10 grams of finely ground and dried sample powders (at least –200 mesh size) are to be supplied.

\* The Loss on ignition (LOI) of samples should not be more than 1%. Sample having LOI greater than 1% will not be analyzed.

***Instructions:***

1. Only 4 samples per requisition will be accepted.
2. The users shall be allotted the time slots as per the availability. The users will be informed about their date and time of slot via e-mail / phone.
3. The samples should be dry.
4. Data will be supplied in the Compact Disc by the Operator. Only new CDs will be accepted for data copying.
5. Only user is permitted to be present in the laboratory during analysis.
6. The soft copy of the requisition form can also be submitted via mail to [crfc@nitsri.ac.in](mailto:crfc@nitsri.ac.in)



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**Undertaking:**

- I/We undertake to abide by the safety, standard sample preparation guidelines and precautions during testing of samples. I/We do understand the possibility of samples getting damaged during handling and analysis. I/We shall not claim for any loss/damage to samples.
- CRFC shall not take any responsibility about the analysis, interpretation and publication of data acquired by the end user.
- I/We agree to acknowledge CRFC, NIT SRINAGAR in our publications and thesis if the results from CRFC facility are incorporated/ used in them.
- I/We hereby declare that the results of the analysis will not be used for the settlement of any legal issue.
- CRFC, NIT Srinagar reserves the rights to return the samples without performing analysis and will refund the analytical charges (after deduction of GST) under special Circumstances.

Signature of the user

Signature of the supervisor/PI

Signature of the HOD with stamp

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**For Office use only**

Lab reference no:.....

No. of samples:.....

Invoice/Receipt no:.....

Name and signature of operator

Name and signature of laboratory in-charge