

S.No:	Date:
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CENTRAL RESEARCH FACILITY (CRF)

MAULANA AZAD NATIONAL INSTITUTE OF TECHNOLOGY BHOPAL-462003 (M.P)

Instrument: BET Surface Area Analyzer

Name of User	Designation & ID No/ Scholar No.	Name of Guide/Supervisor & Contact
Name of Department	Email and Contact No.	
User: Industry / Educational Institute / R&D Institute / MANIT (Funded/Non-funded)	Sample Name	
Nature of sample (Porous Powder sample & should not contain radioactive material)	Number of samples	
Degassing Temp: Nature of testing:		
Other details (Specific measurement requirements if any) :		Total Amount Paid (Rs.):

Use of facilities at CRF, MANIT Bhopal automatically implies that acknowledgement will be given by the user wherever, either oral/written presentations/ publications in journal with the results obtained from the characterization facility:

Further, the user must ensure to send copies of reprints of publications to office of CRF for record which contain results obtained from above facility.

Signature of the Supervisor

Signature of the User

Recommendation from HOD

The above sample may be accepted on the behalf of our department/Institution

Signature of HOD

Note: 1) Payment may be made in the favor of MANIT, ICSC, Bhopal payable at SBI MANIT Bhopal through online as per the details given. **Name of the Account holder – MANIT, ICSC Bhopal, Account No: 10020150016, IFSC Code: SBIN0001608, Bankers Name: SBI, MANIT Campus Bhopal.**

2) To book slot, attach the receipt of the payment along this form and submit it to the office of CRF, MANIT Bhopal. **Slots will be given as per availability from Monday – Friday.**

3) **User is requested to bring writeable CD/DVD to collect the data.**

For office use only

Payment received Receipt no: Online transaction No.....
Dated..... Amount.....

Signature of Technical Staff

Sign of Faculty In-charge