



# ANNA UNIVERSITY

Sardar Patel Road, Guindy, Chennai - 600025, Tamil Nadu, India

## CENTRE FOR FOOD TECHNOLOGY

### Sample analysis requisition form for Instrumental Analysis

Name of the Student / User :

Name of the Department with full address :

Email-Id :

Mobile Number :

Number of samples :

Sample ID with brief description of the sample :

Nature of the sample :

Analysis to be carried out :

Name & Address of the Guide with e-mail id / Telephone contact :

Certified that the sample submitted belong to the user mentioned above. We agree to acknowledge the usage of the facility in all publications arising out of the usage of the **Centre for Food Technology**.

**Signature of the Student**

**Signature of the Guide with seal**

#### For office use

Requisition Number	
DD Details	No : Amt : Bank :
Name and sign of operator	
Delivery Report	Hard Copy: _____ Email: _____ Signature of the receiver & date:
Signature of the Director Centre for Food Technology	

Note: DD should be drawn in Favour of **“The Director, CSRC, Anna University, Chennai-25”**

**Acknowledgement:** Received the data on completion of analysis.

**SAMPLE RECEIVING SLIP**

Sample Type \_\_\_\_\_ Date of Submission \_\_\_\_\_

Analysis requested

\_\_\_\_\_  
\_\_\_\_\_

Test Charge for the analysis(s) \_\_\_\_\_

Payment: Due/Received;

Invoice No. \_\_\_\_\_

(Payment should be made in form of Demand Draft (any where cheque) in favour of  
Director, CSRC, Anna University should be payable at Chennai)

Sample Received By \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_