

University Science Instrumentation Centre (USIC)

University of Delhi, Delhi-110007

Date _____

Requisition form for using the facility of Up / Down Conversion Spectrophotometer

1. Name of the Scholar _____
2. Name of the Supervisor _____
3. Number of Samples (Max. 5) _____
4. Detail of Samples:-
 - Sample Code _____
 - Nature of Samples Thin Film / Liquid / Solid
 - Used Solvent (For Liquid) _____
 - Nature of Study _____
 - Excitation Wavelength (980nm Laser and Xenon Lamp) _____
 - Emission Wavelength Range (Max. 200to 800nm) _____
 - Time Decay (us or ns) _____
 - Quantum Yield (max. No. of Samples 3) _____

Instruction

- i) Sample to be attached with this requisition form (Properly Labeled vials).
- ii) Users must bring their own cuvette for liquid samples.
- iii) On the tentative booking date given below, the user should be present during the measurements and collect the data on CD on the next day. (No pen drives are allowed)

For USIC office Use only

Application No. _____ Date _____ of
submission _____

Booking Schedule Date _____ Time _____

Signature of Student / Scholar	_____	Signature of the Supervisor	_____
Course	_____	Department	_____
Contact Number	_____	(with Seal)	_____

Signature _____

Director, USIC