|  |  |
| --- | --- |
| Sample submission form | Date: ….../….../……... |

**To**

**The HoD**

**Department of Chemistry**

**IIT Patna, Bihta, Amhara Road**

**Patna-801106**

**Subject: Contact Angle Goniometer** (Slot: 1 hour)

**User Information:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | : |  | | |
| Designation | : |  | | |
| Address for communication | : |  | | |
| Phone number | : |  | | |
| Email Address | : |  | | |
| **Payment Details**  Mode of Payment  Receipt No…………… | :    Date | | Amount | Bank |

|  |  |
| --- | --- |
| **Sample information**  Number of sample(s) :  Sample ID :  Sample size (minimum):  Nature of sample(s) : | 5 x 5 mm2  Pellet/Film/Toxic/Non-Toxic (Please tick**✓)** |
| Certified that the sample submitted belong to the user mentioned above. | |

Signature of the Student/User

Signature of the Guide with Seal

**FOR OFFICE USE**

**Job Number: Analysis Date: Report:** Complete//Incomplete//Repeat

Faculty In-Charge Staff In-Charge