**Department of Biotechnology**

**University of Kashmir**

**Facility usage requisition form**

**Requisition Number: Date:**

1. Name, mobile number and email ID of user:
2. Department:
3. Institute:
4. Purpose of Requisition:
5. Instrument to be used:
6. Specific requirement:
7. Intended date and time:
8. Duration of the use:

I certify that the sample(s) to be analyzed is (are) not hazardous or harmful in any manner to human or equipment and agree to acknowledge the facility of Department of Biotechnology, University of Kashmir in our Publications/Reports/Thesis in which data is used.

User signature Signature of PI Signature of Head/Principal

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| For any information: biotech@uok.edu.in or call 0194-2272384, 2272385 |