

CENTRAL HI-TECH LAB (CHL)

Government College University, Faisalabad (GCUF)



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SAMPLE SUBMISSION FORM FOR UV-VISIBLE DOUBLE BEAM SPECTROPHOTOMETER (Lambda 25, Perkin Elmer)

Name (Researcher / Faculty Member / Contact Person): _____

Department and University / Organization: _____

Contact Details: Ph # _____ Cell # _____ Email: _____

Analysis Charges Paid: Yes / No (If No, the sample will not be processed)

If, Yes: Challan # _____ Date: _____ Amount Paid: _____

Bank, Branch and Address (from where the payment has been made): _____

(Note: One copy of original receipt must be attached with the sample submission form for CHL internal record)

Sr. No.	Must Be Filled While Submitting the Sample(s)								For CHL Use Only				
	Reference / Sample Name / ID	Chemical Nature of Liquid Sample	Volume (Minimum 500 µl)	Absorbance Wavelength (Choose only one mode of operation)				Remarks	Sample ID	Date of Analysis	Analyst Name	Remarks	
				Single λ (nm)	λ Scan		Time-Drive						
					Start (nm)	End (nm)	λ (nm)						Duration (min)
1													
2													
3													
4													
5													

(Note: For samples data collection, provide a writeable CD/DVD. For additional samples use extra sample submission form)

Any Additional Information / Comments: _____

Signature (Submitter): _____ Date: _____

For CHL Internal Use Only:

Payment Verified: Yes / No _____ Sample Processed: Yes / No _____ Date: _____

Comments / Remarks (If any): _____

Signature Analyst CHL: _____ Signature Director CHL: _____

Payment Information:

Analysis Rates (For Single λ Run): Academia GCUF: Rs 10/-; Academia other than GCUF: Rs 50/-; Industry: Rs 100/-

(For λ Scan / Time-Drive Run): Academia GCUF: Rs 50/-; Academia other than GCUF: Rs 100/-; Industry: Rs 200/-

Account #: 4137669162

Account Title: Central Hi-Tech Lab. GCUF