S. No. **Bioanalytics Facility, AIIMS, New Delhi**

**Requisition Form**

Name of Guide/PI…………………………………….………………Designation…………………………………………….. Requested by………………………………………………………….Department……………………………………………..

Address……………………………………………………………………………………………………………………………..…………Tel (Office)………………………………………………..Mobile……………………………………………………..

Name of the analyte(s)……………………………………………………………………………………………………………

Sample details ……………………………………………………………………………………………………………...

Source of funding (project code/grant number)..............................…………………………………………………...

Instrument to be used……………………………………………………………………………………………………………..

Whether method needs to be developed:**Y/N**, Reported in the literature:**Y/N**, Method reprint provided:**Y/N**

## Charges

## For LC-MS/MS: Rs. 600 per sample (1000/Hr to be charged if Validation of the method is to be done)

## For HPLC: Rs. 50/sample + Rs. 100 per Hr

## For Flash Chromatography: Rs. 300 per Hr

**Consumables to be provided by the Guide/PI**

User/method specific items such as columns, SPEs, centrifilters, extraction solvents, standards and internal standards etc.

## Agreement

I am agreeing to provide all required materials along with the user charges

## Payment details

**CCRF Bioanalytics (Scientist) Comments**

………….…………………………………………………………………………………………………………………………………………………………....

Transection/Cheque/DD No…………………………..

Amount…………………………………………………..

Date……………………………………………………...

**Signature of the Guide/PI with Seal Signature of CCRF Bioanalytics Scientist**