Faculty of Technology
University of Colombo
Mahenwatta, Pitipana, Homagama, Sri Lanka.

Test No :-

Service Request form for Analytical Services - Use SEPARATE FORM for each test

(For undergraduates of UoC)

Details of the Applicant:

l. Name of the undergraduate student: ……………………………………………………………………………………………..

II. Registration No: ………..…..

III. Department: ………

IV. Faculty: …….

V. Contact No: …………………………………………..   VI: E-Mail Address: …………………………………………………

Details of the Sample/s:

l. Required analysis: SEM ☐   SEM + EDS ☐   FTIR ☐

ll. Sample name with details: ……

………

lll. No. of samples: ……

lV. Details of test parameters: ………………………………………………………………………………………………………

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

Signature of Applicant   Date

Recommendation by the Supervisor/s and the Head of the Department:

I. Title of the research project: ………………………………………………………………………………………………………

……..

ll. Recommendation of the supervisor/s:

Name of the supervisor/s: ……..

Date: ……………………………………………………   Signature/s: ………………………………………………………

The above sample/s is/are recommended/not recommended for analysis.

lll. Recommendation the Head of the Department of the student:

Name of the Head of the Department: ……………………………………………………………………………………………

Date: …………………………………………………………   Signature: …………………………………………………………

The above sample/s is/are recommended/not recommended for analysis.

Approval from the Head/Department of Instrumentation and Automation Technology:

Approved ☐   **Not Approved** ☐

Remarks: ……

…………………………………………   …………………………………………

Signature   Date

To be filled By Analyst/Technical Officer/Co-coordinator - Clean Room

I.   Date of the Test: …………………………………………..   Time Duration: From: ……………………………………………

                                                                                                            To : ……………………………………………

II.   Details of tests carried out: ………………………………………………………………………………………………..

III.   Name and signature of the analyst/technical officer: …………………………………………………………………..

IV.   Name and signature of the co-coordinator-clean Room: ………………………………………………………………

Please send the soft copy of the filled service request form to analyticalservices_cleanroom@tec.cmb.ac.lk, OR send the hard copy to Head/Department of Instrumentation and Automation Technology, Faculty of Technology, University of Colombo.