



THE ERODE COLLEGE OF PHARMACY, ERODE
Center for Research and Development
ADVANCED RESEARCH SUPPORT FACILITIES (ARSF)
Sample Analysis Requisition Form



I. Personal Information

Date: _____

Name: _____ Designation: _____

Mobile No.: _____ E-mail ID: _____

Industry / Institution (Student): _____

Affiliation: _____

In case of students, Course: _____

Specialization: _____ Period of study & Year of completion: _____

Address for Communication: _____

Research Supervisor / Guide Name & Department: _____

II. Research Information

Project Title: _____

Name of Work: _____

Detailed description of the Research Work:

Certification by (Guide & HOD): Certified that the user is a student / faculty / employee of our department and the work is meant for Teaching/ Experimental/ Research/ Commercial purpose of our Institute/ Organization. The user had gone through the instructions regarding the procedures given in the website. The samples are not radioactive/ harmful to persons handling them. The samples information is correct and the user will comply with ARSF's rules and procedures.

Signature with date	Research Scholar	Research Supervisor	HOD
Name			
Office Seal (Mandatory)			

For Office Use

Sample Code: _____

Nature of Sample: _____ Department: _____

Type of Analysis: _____

Date received: _____ Date completed: _____

Invigilator: _____

Service In-charge for Data sent if by Email: _____

Amount: _____

ARSF Head	Invigilator Signature	Official Seal

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RULES AND REGULATIONS

- Samples should be sent along with the duly filled & signed Sample Analysis Requisition Form in envelopes with the research supervisor.
- All bottles or jars or other containers containing the samples for analysis shall be properly labelled and the parcel should be properly addressed.
- The stopper/cap should be securely fastened so as to prevent leakage of the contents in transit.
- The bottle, jar or other container should be completely wrapped in fairly strong thick paper. The ends of the paper shall be neatly folded in and affixed by means of gum or other adhesive.
- Sample should be sent along with appropriate handling instructions for safety to the Invigilator.
- Samples for analysis must be prepared in a manner that is compatible with the use of the instruments.
- All possible care will be taken regarding the samples received for testing. The ARSF however is not liable for any loss or damage that may occur due to unforeseen circumstances.
- Sample will be rejected due to any one the following reason, Unlabelled sample, Insufficient information, broken /leakage of container and Insufficient volume for the test requested
- The expected time of results can vary from two weeks to a month (in case, downtime of instruments due to any technical reason will not be included while calculating the aforementioned duration. In case of such delays, there will be no financial implications on ARSF).
- Testing “on priority basis” will be accepted at the discretion of the Test Laboratories with TWICE the fees
- The Report/Result for the concern analysis will be sent to client’s E Mail address through our ARSF, and the data’s will be kept only for the period of 30 days of report/results.
- The contents of test reports and correspondence with clients will be kept strictly confidential and will not be disclosed to a third party.
- The samples for testing will be retained for a period of 30 days after submission of results, after the tenure period sample will be discarded.
- Samples without payment receipt/transaction ID will not be run/analysed.
- ARSF Test Laboratories reserve the right to revise the rules and regulations and schedule of sample analysis charges as and when deemed necessary.
- Sample to be sent to the following address;
Co-ordinator Advanced Research Support Facilities (ARSF),
The Erode College of Pharmacy, Perundurai Main Road, Veppampalayam, Vallipurathanpalayam (Po), Erode, Tamil Nadu – 638 112.