

## HPLC Service - Request Form

Sl. No. with Date.....

Operator.....

**ALL COLUMNS ARE MANDATORY**

# Institute for Intensive Research in Basic Sciences (IIRBS)

Mahatma Gandhi University

Kottayam

### Name of the Student:

Name and address of Research guide/Supervisor:		Phone:
		Email:
Sample Code , Name and Structure of the molecule:		
Sample format: (please select)	Solid/ Liquid/ Gel	
Number of components:		
Quantity: ( $\mu\text{g}$ )		
Estimated purity (%):		
<b>Chromatographic conditions</b>		
Stationary phase:		
Mobile phase:		
Chromatographic mode:		
Type of Detector:		
pH:		
Detection wavelength:		
Flow rate :		
Temperature :		
Bill to (full address):		
Title of the Research work/Project:		

Last Publication of the Supervisor (Journal Name, Vol., Issue, Page no. Year):
Signature of the Research guide/Supervisor(with seal):
Have you made any Research publications out of the HPLC data obtained from the IIRBS?
Special request :

**Undertaking:** I hereby undertake that the HPLC service of IIRBS shall be acknowledged in the research publication.

**Signature of customer**

Remarks:

**Service Charges:**

	M G University Campus	Other Educational Institutions and Universities	Commercial Organizations
Samples with known methodology	500	1000	2000
Samples for methodology development	5000	7500	10000

*\* This service charge is excluding solvent cost.*

*\*A trained person in HPLC will have to make a personal visit to IIRBS for the methodology development in the case of unknown samples.*

**Note**

1. Samples should be submitted along with the prescribed request form duly filled. The D.D should be send in favour of Coordinator, Institute Development Fund, IIRBS, Mahatma Gandhi University, Kottayam.
2. Generally HPLC time is booked in advance. Data will be posted to individual users through email.
3. Acknowledgement must be made for the service in the publications.

**Date:**

**Place:**

**Signature  
Authorized person (IIRBS)**