



National Institute of Technology Silchar  
Department of Mechanical Engineering  
Machine Element Laboratory  
**Requisition Form**

<b>Name of User</b>	:	
<b>Designation</b>	:	
<b>Organization/ Institute</b>	:	
<b>Department</b>	:	
<b>Address for Communication</b>	:	
<b>Email ID</b>	:	
<b>Contact Number</b>	:	
<b>Required of Instrument</b>	:	
<b>Sample details</b>	:	
<b>Input Parameters</b>	:	
<b>Sample name/number (if any)</b>	:	
<b>Number of samples (Maximum 03 numbers)</b>	:	

Certify that the samples are belongs to the user mentioned above and the results will be used only for academic and research purpose.

**Signature of User with date**

**Signature with date and seal  
(Supervisor/Faculty member/HoD)**

<b>Date of allotment</b>	:	
<b>Remarks, if any</b>	:	
<b>Signature of Laboratory</b>	:	