

Ashokrao Mane College of Pharmacy, Peth Vadgaon

CENTRAL INSTRUMANETATION ROOM (CIR)

CIR Usage Application Form

Details of Applicant:			
Name in full:			Date of Application:
			/ /20
Class & Sem:			Roll No.
Name of Instrument			
Facility to be Used			PRN No.
Duration of Usage:	From: Time/Day/Month/Yea	r	
	To: Time/Day/Month/Year		
Purpose of Usage:			
Coursele Dataila			
Sample Details:			
Additional Information:			
Important Instructions:			
-			
 Students MUST work under supervision of faculty/instructor/guide when working in the laboratory. Student MUST be well familiar with the Standard Operating Procedure (SOP) of the respective 			
instrument.			
• Student MUST maintain the logbook after usage of the CIR facility.			
• Liabilities regarding breakage/wear-n-tear/theft shall be enforce on student and his/her			
supervisor/instructor/guide.			
Declaration:			
I hereby declare that, the information given above is true to my knowledge and belief. I further			
declare that. I shall use the facility of CIR in the abiding with the instructions therein. If anything			
misbehavior/miscondue	ct/misuse happens, I solely respon	sible for the sa	me.
Applicant Name		Dated Sign	
Guide/Faculty Name		Dated Sign	