



National Institute of Technology, Agartala

राष्ट्रीय प्रौद्योगिकी संस्थान अगरतला

Agartala, Tripura, India, Pin -799046

**ELLIPSOMETER REQUISITION FORM
CENTRAL RESEARCH FACILITY, NIT AGARTALA.**

User's Name: _____ Roll No.: _____ Mob. No.: _____

Contact Details: _____ E-mail: _____

Supervisor's Name: _____ Deptt.: _____

Analytical Requirements

I would like to get _____ numbers of specimens (Metal / Ceramic / Polymer/Semiconductor) to analyse the sample of _____ (type: Thin Film) in the Ellipsometer for the following examination / analysis using an appropriate mode:

Measurement of Refractive index (n)

Measurement of Thickness (t)

At a time maximum 4 samples can be done.

Declaration by the user

We are confident and also certify that the sample is **stable, non-volatile, non-toxic and is non-radioactive** by nature. I agree that my samples meet the above requirements. If the samples damage to the equipment due to incorrect information being provided, I will be responsible for it. The results recorded, if communicated for publication, will acknowledge this facility at CRF.

User's Sign.

Supervisor's Sign.

Sign of HOD (with date & seal)

Internal users please submit the filled and signed form to

Dr. Ardhendu Saha,
Associate Professor, Department of Electrical Engineering
NIT Agartala, Jirania, West Tripura-799046

Schedule of Time Used (For Office Use Only)

Date	Run Started	Run Completed	Total No. of Sample/Session

Signature of Technical Officer

Date : _____

Signature of the User

Date : _____