**Central instruments Facility, IIT Guwahati Instrument Operation Authorization Form**

**(Separate Form should be submitted for each Instrument)**

“The following student may be considered for training an authorized operator at Central Instruments Facility (CIF) for Instrument(s) operation(s) only. We understand that his/her period of operation (if inducted as an operator), will not be considered as teaching assistantship duty either in CIF or in the respective department/centers. The students should obey all the rules and regulations of CIF."

Name of Student: Department/Centre:

Roll No. :

Paste a passport size photograph

Contact phone no: Lab No…………Mobile No…………… Email id: …………

Name of Supervisor:

Contact phone no: Office…………. …. Mobile No……………………………….

\* **Student should submit scanned copy of photo and ID card by email to** **cif@iitg.ernet.in**

The student may be trained to operate the ……………………………………………. (VSM/ ESR/ NMR/TRPL/LCMS/FESEM/SCXRD etc.) instruments at Central Instruments Facility (CIF), We will acknowledge CIF for the instruments facility in the conference & journal publications.

(Signature of Student) (Signature of Supervisor) (Signature of HOC/HOD)

This student has been trained and may/should not\* be allowed to operate the…………………………………(Name of the Instrument) instrument independently for the period -------------upto----------(not exceeding 12 months). In case the student wishes to continue as an authorized instrument operator after the expiry of the allowed period of operation, a renewal form will have to be provided.

\*For the following reasons (use back side if required):

Signature of T.O./S.O/JTS

Recommendation

Approved/ Not Approved

Head, CIF