Job Order for **Atomic Force Microscopy (AFM)**

(Contact the instrument In-charge by e-mail: **necbh.afm@gmail.com** in advance) **North East Centre for Biological Sciences and Healthcare Engineering (NECBH)**

**IIT Guwahati**

|  |  |
| --- | --- |
|  | Date: |
| Name of Applicant: | Email ID: |
| Name of Supervisor: | Contact No.: |
| Department/Centre: |  |
|  |  |

**Description of the sample**

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| --- | --- | --- | --- | --- | --- |
| **S.no.** | **Sample Name / Code** | **Scan Size required (in µm):** (e.g., 1µm, 5µm, 10µm) | **Resolution required** | **Type of sample:** (e.g., thin film, particles on glass substrate, cellulose) | **Mode of AFM (Contact / Tapping / EFM / MFM / KPFM / PFM):** |
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Please ensure that Size of the sample should not be more than 12 mm X 12 mm and the thickness should be < 2 mm.

Terms and Conditions

\*Applicant should obey the general rules and regulations of NECBH (visit <http://www.iitg.ac.in/necbh/> for rules and regulation) and incomplete job order will not be accepted.

\*Applicant must be present 5 minute before the scheduled time, if they want to be present physically.

\*Applicant must produce their I card during sample booking and data collection. In case the applicant is absent, the alternate person should submit a forwarded letter from their respective supervisor/PI to perform the same.

\*Applicant has to look in the email, time to time for updates. For any clarification, applicant should contact the In-charge.

\* Applicable sample charges shall be paid in favour of **IIT Guwahati, II&SI DBT AC 39377583642** in the form of DD and submitted along with the sample.

1) I/We shall obey the above mentioned **terms and conditions.**

2) **I/Weshall acknowledge North East Centre for Biological Sciences and Healthcare Engineering (NECBH), IIT Guwahati and Department of Biotechnology (DBT), Govt. of India with project no. BT/COE/34/SP28408/2018 for the Atomic Force Microscopy (AFM) facility** in the conference/Journal Publications/BTP/MTP/PhD. Thesis etc.

Signature of Applicant Signature of Supervisor/Faculty

For office use only:

Job Order No.(Sl. No. of Analysis): Date of analysis:
Remark of In-charge (Job completed/not completed):
\*Reason for non-completion of job:

Signature of In-charge