Request for Materials Laboratory Access

Centre for Nano and Soft Matter Sciences
Arkavathi Campus

Energy Laboratory – Expert User Access Form

Name: ……..……..…

Supervisor:…… ……

ID No.: Refer to the front side S. No.: Refer to the back side of the ID card

Expert User for the following instrument/s (tick the appropriate):

- ☐ Solar Simulator
- ☐ EQE/IQE
- ☐ Photovoltaic Glove box
- ☐ Battery Glove box
- ☐ Battery Tester
- ☐ AutoLab Electrochemical work station
- ☐ CHI Electrochemical work station
- ☐ Light Source
- ☐ Micro-GC
- ☐ Other (please specify) _____

Date: Applicant's Signature:

Forwarded by
Research Supervisor

Remarks: You may indicate access duration

Authorised by
Lab-in-charge
Name of Lab-in-charge: Dr. Neena S. John

Remarks: You may indicate access duration

For office use

Access starting date*: ___/___/_____ S. No.:

Access given by: Remarks:

*The access ceases when the applicant requests for 'no-due certificate'.