



CENTER FOR DNA FINGERPRINTING AND DIAGNOSTICS

SOPHISTICATED EQUIPMENT FACILITY

UPPAL, HYDERABAD

HPLC –REQUISITION FORM

NAME		DATE :
GROUP / SUPERVISOR		
INSTITUTION	a) CDFD []	b) Academic [] c) Industry []
NO.OF. SAMPLES		
COLUMN	a) RP [] b) SE [] c) IE [anion / cation] d) Hydrophobic []	
SAMPLE INFORMATION	a) Conc.:	b) Molecular weight:
	c) Solubility:	d) Column Temp:
	e) Buffer :	f) Source of the sample:
	g) Method:	
DECLARATION	This is to certify that these samples do not contain Radioactive material Signature <input type="text"/>	
E-mail / PHONE		

This is to submit that Content of this report is meant for our information only and we will not use the content of this report for advertisement, evidence, litigation or quote as certificate to third party.

Signature of Student

Signature of the Group Head