REGIONAL CENTRE FOR BIOTECHNOLOGY   *CENTRAL INSTRUMENTATION FACILITY*
An institution of Education, Training & Research   *IVIS SPECTRUM IMAGING SYSTEM*
NCR Biotech Science Cluster
3rd Milestone, Faridabad-Gurgaon Expressway
Faridabad - 121 001 (Haryana)

_____*Date*_____

Software dongle needs to be issued from concerned Technical person separately after making entry into the register.

Name and designation   _____

User Category (Tick)   (a) RCB_____ (b) Other Govt. Institutions (name)_____

Lab/ Dept (for RCB users)   _____

Address (for non-RCB users)   _____

Tel /Mobile no.   _____ Email_____

Mode of Instrument handling   i) Operator Assisted (   )   ii) Independent (   )

_____

Sample information

Animal Used: _____

Label Molecule: _____

Time of Beginning of experiment: _____

Time of Completion of experiment: _____

Anaesthesia Condition: _____

Animal weight: _____

<div align="center">

Undertaking

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I/We undertake to abide by the sample preparation guidelines. I/We submit the sample(s) in good faith. While due care will be taken in sample handling (for operator assisted/ handled samples), the CIF will not be held responsible for loss/damage due to reason(s) beyond its control. I/We shall give due acknowledgement to the facility in the results so published in the journals.

Signature of User _____   **Signature of PI with Date** _____

Signature (Scientist –In-Charge/Approving Authority)   **Signature of CIF Technical Assistant**

Date of completion of experiment and remark if any:

 NB: The data can be collected in CD/DVD only. No USB (Pen drive/Hard disk) will be allowed.