



**SOPHISTICATED ANALYTICAL INSTRUMENTATION FACILITY**  
**St. Peter's Institute of Higher Education and Research**  
**ST. PETER'S UNIVERSITY**  
Avadi, Chennai – 600 054.

**FTIR - ATR Spectrometer**

**User Information**

**Date:**

Name :  
Designation :  
Affiliation :  
Address for communication :  
Phone number :  
Email address :

DD. NO. ....Date. .... Amount. ....Bank. ....

Certified that the sample submitted belong to the user mentioned above. I agree to acknowledge the usage of the facility in all publications arising out of the SAIF, SPU, Chennai. The details of publications will be intimated to the SAIF.

Signature with date & Seal  
(HOD / Principal / Guide / Managing Director)

Dean  
Research & Development  
St. Peter's University

Sample code(s) :  
Region of measurement for IR :  
\* Sampling Technique: ATR  
\* Nature of the sample (solid/liquid) :  
\* Whether Hygroscopic or not :  
\* Do you need expanded Plots? \_\_\_\_\_

Result shall be provided in Soft copy form

Columns marked \* must be filled to ensure quick processing of samples Reports will be released only after payment is received.

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Charges for the measurement should be sent through an advance demand draft drawn in favor of **“St. Peter's Institute of Higher Education and Research, Avadi, Chennai”** along with the samples, to the **Dean (R&D), St. Peter's University, St. Peter's Institute of Higher Education and Research, Avadi, Chennai-600 054.**

As per the guidelines of the St. Peter's University (SPU), in all publications of Research work, where in the analytical services of the SAIF have been made use of, the SPU and the SAIF shall be duly acknowledged. Kindly send us the publication reference (Journal name /volume Number / names of the authors / date of issue of the publication etc) to us.