



Punyashlok Ahilyadevi Holkar Solapur University

School of Physical Sciences,

Solapur-Pune Highway, Kegaon Solapur- 413 255.

Requisition for Uv-Vis spectrophotometer

(Model: Shimadzu, UV-2600i, Japan)

Date: / /

Name of the Student: _____

Name of the Guide: _____

Name of the Institution/Department: _____

Number of Samples: _____ Sample code: _____

Type of Compound: Liquid/Powder/Glass

Frequency range of scanning: _____

Phone/Mobile Number: _____ Email: _____

Signature of the Student

Signature of the Director,
School of Physical Sciences,

(Please Note: (1) Submitted Samples MUST BE DRY (2) Minimum 150 mg should be submitted)

For Office Use Only

Date of Analysis Completed: / / Operator: _____

Payment Details: