

Service Request for Scanning Electron Microscopy

(for biological and non-biological samples)

For NCMR Use Only

PRN:

This is a fillable PDF file. You can type information directly into this file.

IMPORTANT: Please read all 'Guidelines' carefully before sending the samples. Please refer to filled sample form available on our website to complete this form; for any assistance feel free to call us on +9120 2532 9000/43 (10.00 to 17.00 hrs, IST).

Details of the Investigator

Name of Investigator:

Affiliation & Address:

Email Address:

Contact Number:

Date of Dispatch:

Sample Details

Sr.*	Sample ID	Type ¹	Hazard Group ²	Sr.*	Sample ID	Type ¹	Hazard Group ²
1.				4.			
2.				5.			
3.				6.			

*Attach separate sheet with table in format above for more strains, if required. ¹Please mention whether Bacteria (B), Archaea (A), Fungi (F), Other living organism (OL) or non-living (NL). ²Mention Hazard Group 1, 2 or Do Not Know. See [ABSA](#), [WHO](#) and [LPSN](#) websites for more information on hazard groups.

IMPORTANT | Sample Submission Guidelines:

- The service charges include sample coating and imaging. Please ask for separate quote for sample processing; write to mcc@nccs.res.in. If you are sending viable biological samples, we accept cultures which can be handled under BSL-1 and BSL-2 facility only. You are requested to visit [ABSA](#), [WHO](#) and [LPSN](#) website for more details on BSL levels.
- Seal the agar plate/ slant tube/ stab vial with laboratory paraffin film and pack them appropriately to prevent any damage during transportation. It is important for biosafety reasons. Please note that we do not accept damaged consignment.
- Cultures from private addresses will not be accepted. It is requested to send the cultures through proper channel and must be signed by the department head or advisor.
- For post-receipt sample status, please contact the section in-charge citing the Processing Reference Number (PRN) of the culture(s) as mentioned in the acknowledgment email sent by Service coordinator, NCMR-NCCS.

Growth Parameters and Media

Media Name:

Manufacturer & Cat. No.

Attach Separate Sheet for Media Composition if custom made

Optimum Growth Parameters: pH:

Temperature (°C):

Incubation Period:

Oxygen Requirement:

Aerobic

Anaerobic

Microaerophilic

Payment Details

Demand Draft No.

Date

Amount

Bank Details

Seal of the Institute

Date & Signature of Principle Investigator

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Date received:

Acknowledgement sent on:

by:

Results verified by:

Report sent on:

Remarks, if any: