**Birbal Sahni Institute of Palaeosciences**

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**Radiochronology and Isotopic Characterization laboratory**

**Sample Requisition Form**

|  |
| --- |
| **User Information** |
| Name of the Investigator | **:** |  |
| Email and Contact no | **:** |  |
| Address | **:** |  |
| Category (In-house/ Govt. Sponsored/ Private Industry) | **:** |  |
| Project No. & title | **:** |  |
| ***Please attach copy of Quotation /Approval***  |
|  |
| **Sample details** |
| No of Samples with ID | **:** |  |
| Sample type | **:** |  |
| Bulk/Pre-processed | **:** |  |
| Location of sample | **:** |  |
| Expected Stratigraphic/ Archaeological age | **:** |  |
| Objective & Significance of the study | **:** |  |

Please attach stratigraphic litho-log with clearly indicating sample position(s) and other environmental details

Name & Sign of Investigator

Litholog indicating the position of samples