



DEPARTMENT OF CHEMISTRY, IIT MADRAS

ATR & FT-IR SPECTROMETER

User Information

Name of the student` : _____ Billing Name: _____

Name of the Guide : _____ Email ID : _____

Name of the Institute: _____ Contact No : _____

Sample Information (Solid / Liquid)

Wavenumber Range:

Mode of Measurement (Y axis):

S.No.	Sample code –preferable solvent	Functional groups present (-OH, -CHO, -COOH....etc)

Signature of the Student

Signature of the Guide with Seal

Date:

UPI Transaction ID:

Amount:

For office use only

Received on:

Analysed on: