



# CoE-RTC, Shahjalal University of Science and Technology

## Requisition Form for Gas Chromatography

Mass Spectrometry (GC-MS) System Updated at 05 May 2025

Bank Account Name: **Centre of Excellence-Research, Testing and Consultancy (CoE-RTC)**

Current Account ( Official) : **5632502001086**, Sonali Bank, SUST Branch, Branch ID: 56325

1) Researcher/customer details: a) Name:

b) Category: ☐ A / ☐ B / ☐ C

c) Phone number:

(**Category A:** Student or faculty of SUST; **Category B:** Student or Faculty of other Public University/Govt. Institute; **Category C:** Individual/consultant of private institution.)

d) Institute & Dept.

e) Email address to send the data:

2) Sample information: a) Physical State : ☐ Liquid ☐ Other

b) Does the sample contain volatile materials ?

☐ Yes

☐ No

c) What elements does the sample tentatively contain? Answer:

d) Amount of sample: **5** ml

e) Name and Number of Sample:

4) Fee: a) Amount (Tk) deposited:

b) Bank recite number

c) Is the main copy of recite attached? Yes ☐

No ☐

**Fee: 1000 Taka (category A); 2500 Taka (Category B); 5000 Taka (Category C)**

### Office Use Only

**Centre of Excellence-Research, Testing and Consultancy (CoE-RTC), SUST**

(Customer Copy)

SL No:

Date:

Bank recite number:

Name:

Institute:

**Taka ..... is received for ..... GCMS sample of Category .....**

**Received by**