|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Booking Date | CD/FL/  Type of expt. | Sample Type (Protein/ DNA/Peptide)  Size/Conc./  No. of Tryptophan | No. of Samples & Scans required per Sample | Name of requesting person / contact details | Training obtained  Y/No | Whether needs assistance  & Level of assistance | DAE units other than TMC/  R&D and other Educational Institutions/ Industry/  Corporates | Buffer Composition |
|  |  |  |  |  |  |  |  |  |

**Booking form for the CD/Fluorimeter Expts**