



ST.MARY'S COLLEGE (AUTONOMOUS), THOOTHUKUDI- 628001

*Re-accredited with* A+ *Grade by* NAAC

CONSULTANCY SERVICE REQUEST FORM								
Email:								
Name:	Prefix	First Name			Last Name			
Department								
Name of the Institution: Complete Address:								
Phone:	Land Area Code		hone Io.		Mobile No.			
Designation: Faculty Scholar Student Other (specify)								

## Check each service item you require

Consultancy Service Item	Consultan cy Service Item	Consultancy Service Item	Consultancy Service Item	Consultancy Service Item	
Mushroom cultivation Antibacterial	DNA isolationfrom various sources Isolation and Identification of	Molecular Modelling RFLP	Computer Aided Drug Design Identification of puffer fish	Online Marketing Technological Banking	
Activity	Bacteria	PAGE	Diversity	Consumer	
Activity	+ + + + + + +		analysis	Behaviour	
Soxhlet Extraction	PCR (Primer designingandgene amplification)	AGE	Generalized Topology	Stress Management	
Quality assurance of drinkingwater	DNAisolation (Plasmidand Genomic)	Gene cloning	Nano Topology	Entrepreneurship	
Analysis of spoilageoffood	Analysis of Bio chemical tests for		Micro Topology	Educational psychology	
Soil and water analysis	~		Personality psychology	Health psychology	
Demineralization of water	Ultracentrifugation				

Submitted Sample specification form:

No

Yes

Signature of HoD/Guide(In case of student or researcher)

For Office Use Only

Date of Sample Receipt	
Received by	
Rack Number/Folder No.	
Sample Type and Quantity	
Sample Quality	
Qualified Quality Test	Yes No
Date of Analysis	
Analysis Done by	Name:
	Signature:
	Name:
Checked and Counter Signed by	Signature:
Date of Result Send	

Signature of Research Coordinator

Signature of Head of the Department

(Seal)

Signature of Principal