

Government of India
Department of Atomic Energy
Raja Ramanna Centre for Advanced Technology
Indore 452 013

Request form for irradiation using 10 MeV electron linear accelerator at ARPF

1. Name of the main user :
2. User's institution's name :
3. User's institution's address :
4. User's email address :
5. User's cell phone number :
6. Irradiation mode : Electron beam / X-ray (Strike out one)
7. Beam energy requirement :
8. Dose to be delivered :
9. Sample size and quantity :
10. Sample chemical composition :
11. Nature of the sample : Biological / Chemical /
12. Toxicity of the sample : Toxic / Non-toxic (Strike out one)
13. Sample form : Solid / Powder / Liquid (Strike out two)
14. Nature of the sample : Edible / Non-edible (Strike out one)
15. Colour photograph of sample : Attached (Compulsory)
16. Aim of the irradiation study : Provide details in a separate sheet as Annexure-1
17. Expectation from the study : Provide details in a separate sheet as Annexure-2
18. Literature relevant to the study : Provide details in a separate sheet as Annexure-3
19. Intended use of the samples : Provide details in a separate sheet as Annexure-4
20. Details of samples packing : Provide details in a separate sheet as Annexure-5
21. Precautions during handling/irradiation : Provide details in a separate sheet as Annexure-6
22. Are the samples to be used by human beings? : Yes / No (Strike out one)
23. Are the samples to be eaten by human beings? : Yes / No (Strike out one)

Declaration: The user hereby declares that the samples irradiated at ARPF will be used only for R&D purpose, strictly as per the details given above.

User's signature: -----

Approved by: -----

Signature with date & Seal of the

Head of Institution/ Division/ Project Guide of the user's institution

Contact email address of the approver:

Contact phone number of the approver:

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