

**Sophisticated Instrumentation Centre (SIC)
Dual Ion Beam Sputtering Deposition (DIBSD) Facility
Indian Institute of Technology Indore**

Instrument: *Dual Ion Beam Sputtering Deposition (DIBSD) Facility*

Job requisition form

DATE:

1. NAME OF ORGANISATION:
2. NAME OF USER:
3. NAME OF THE GUIDE/PI:
4. ADDRESS/DEPARTMENT:
5. E-MAIL:
6. CONTACT NO. / FAX. NO.:

Sample Growth Condition

Deposition temperature (°C): _____	Pressure (mbar): _____
Gas Composition: _____	Material to deposit: _____
Substrate type: _____	Substrate thickness (mm): _____
Substrate dimension and shape: _____	Others: _____

Use of ***Dual Ion Beam Sputtering Deposition (DIBSD) Facility*** at IIT Indore automatically implies that following acknowledgement will be given by the user whenever either oral or written presentations are made of the results obtained from the facility:

“We are grateful to the “**Dual Ion Beam Sputtering Deposition (DIBSD) Facility equipped at Sophisticated Instrument Centre (SIC), IIT Indore.**” Further, the user must ensure to send us copies of reprints of publications which contain results obtained from above facility.

**Signature of Guide/Coordinator/Supervisor/User
Date**