



BIO-IMAGING FACILITY

C-Wing, Ground Floor, GC-01 and 02
Division of Biological Sciences, Indian Institute of Science
C V Raman Avenue, Bengaluru, Karnataka 560012
Booking/Charge Sheet

1. User Name : _____
2. Email ID : _____
3. PI Name/Department : _____
4. Type of sample & Imaging : Fixed ☐ Live ☐
5. Select the microscope for your usage (Slot duration- one and half hour):

Confocal Microscope	Charges/slot (Rs)	Indicate the confocal microscope required
Zeiss LSM 880 Airyscan	500	
Leica SP8 Falcon (FLIM,FCS)	500	
Andor Dragonfly Spinning Disc	500	
Zeiss laser capture microdissection (LCM)	500	
Nikon Ti2 Spinning Disk	500	

6. Date of Booking :
7. Write to us at confocaliisc@gmail.com for slot requisition and any other details or call us at 08022933506.

Grant No:

PI Signature:

Total No. of Slots :

Total Amount : 500 x = _____

