**NATIONAL GENOMICS AND GENOTYPING FACILITY (NGGF)-DBT**

National Institute of Plant Genome Research

NIPGR, ArunaAsaf Ali Marg, New Delhi-110067

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| **To be Filled by Staff** |
| **Analysis ID: Date:** |
| **Work to be Carried out by:** |
| Client requirement: |
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| Data Analysis Suggested to Client: |
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| Process or Method of Data Analysis: |
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| Software to be Used: |
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| Number of working Hours/Days Required |
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| Amount to be Charged: |
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| Work Starting Date: Work Ending Date: |
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| Here I am agreeing that, I had discussed with the client and understood the requirement. The analysis of the data will be completed as per the time suggested. |
| \*Any work related queries from the client to be sorted out within 5 days from the ending date. |

Signature of the Staff

Yours faithfully, Sign: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_(Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

**Approved by Programme Director NGGF**

**Signature:**