



Centre of NEMS and Nanophotonics, IIT Madras

Mask Writing Requisition Form

Name	
Roll No. / Employment Id	
Size of the mask layout	
Minimum feature size	
Type of Mask (Dark/Bright Field)	
Mask # (in case of multiple lithography steps)	

Device Description (to be fabricated):

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Signature of guide

Date:

Signature of faculty-in-charge

Date:

Operator's comments & signature with dates (after fabrication):

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Mask Inventory No: