**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: