



R.M.K.COLLEGE OF ENGINEERING AND TECHNOLOGY
DEPARTMENT OF MECHANICAL ENGINEERING
ENQUIRY / ORDER SLIP



Personal Details

Name of the person :
Affiliation University/College/Org :
Designation/Position :
Department :
Address :

Email :
Handphone :

Product Details

Composite Type :
Type of Fibre :
Type of resin :
Direction of Fibre :
Size of laminate Required :
(minimum 300 x 300mm²)

Office Use

Order Number :
Order Date :
Type :
Delivery date :

Signature of Research Officer :
Signature of HOD :
Signature of Principal :