

**TEZPUR UNIVERSITY**  
**Hands on Training (Level-1) Programme**  
**on**  
**Basic MEMS Fabrication Techniques**

A "Hands on Training (level-1)" on various equipments and processes in state of the art Clean room facility of Micro-fabrication lab will be organized in the Department of Electronics and Communication Engineering, Tezpur University. Details of the training programme are as under:

**Training Modules:** Hands on Training on Basic MEMS Fabrication Techniques.

1. Introduction to MEMS
2. Wafer Cleaning and Selection
3. Wet and Dry Oxidation
4. Photolithography procedures
5. Wet Etching
6. Plasma Enhanced chemical vapour deposition
7. Thin film Deposition

**Organized By:** Department of Electronics & Communication Engineering, Tezpur University

**Sponsored by:** Workshop is sponsored by Deity sponsored project

**Period of workshop:** 1 week

**No of Participants:** 20 Candidates

**Date of Workshop:** 03.08.2015 to 07.08.2015

**Eligibility:** Research scholars / faculty researchers from colleges or universities of north east India.

**How to Apply:** Submit scanned copy of the fully filled in attached Registration Form duly forwarded by the head of the department/Principal via email to [pps@tezu.ernet.in](mailto:pps@tezu.ernet.in).

**Last Date of submission Registration form:** 17 July 2015

**Address for correspondence:** Prof P.P.Sahu  
Principal Investigator, Deity Project  
Department of Electronics & Communication Engineering.  
Tezpur University  
Ph. No.- 9085180623  
Email:- [pps@tezu.ernet.in](mailto:pps@tezu.ernet.in)

**N.B. - No registration fee required. Students will be provided only accommodation. TA and DA will not be given.**

**Sd/-**  
Dean, Research & Development  
Tezpur University

**Encl. Registration Form.**  
Memo No. DoRD/ECE/PPS/20-151/5730-A

Date:

**Contd.....**

# Registration Form

Hands on Training Programme on Basic MEMS Fabrication Techniques

(From 03.08.2015 to 07.08.2015)

1. Name of the candidate: \_\_\_\_\_

2. Sex: **Male/Female**

3. Department: \_\_\_\_\_

4. College/Institute/University (with address): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Correspondence Address: \_\_\_\_\_

\_\_\_\_\_

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Ph.no. \_\_\_\_\_ Email. \_\_\_\_\_

6. Designation: Faculty/Ph.D/ (Please tick)

7. Accommodation required: **Yes/No**

(Accommodation will be provided within the University campus)

Signature (applicant)

**Recommended by**

Signature of Head of the Department/Principal

Name:

Email.-

Ph.no.-