

CHNS – Vario Micro Cube

Name..... Date of sample submission.....
Institution..... Faculty..... Dept.....
Address.....
Telephone / Mobile No..... Fax No..... Email.....
Sample identification No.....
No. of Samples Project No. / Course No.....

1. I agree to acknowledge **Research Sector Projects Unit (GS 01/05)** in Annual Reports, Final Reports, Graduate student's thesis and generated publications. I also confirm that these analyses are consistent with the objectives of my on-going research projects / research. I agree to pay standard charges for analysis done for Non-RA funded projects/samples from outside.

2. I agree to forward to the VDR-Science, any papers which may be published due to the usage of the instrument.

Sample Hazard : ☐ Toxic ☐ Explosive ☐ Corrosive ☐ Flammable ☐ Non-Hazardous

P.I / Supervisor..... Signature of P.I.....

| Elements to be determined (Please tick) | Expected % | | | | | | |
|--|------------|--|--|--|--|--|--|
| C | | | | | | | |
| H | | | | | | | |
| N | | | | | | | |
| S | | | | | | | |
| O | | | | | | | |
| Cl | | | | | | | |

Special instructions, if any

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ENDORSEMENTS

| | | |
|---------------------------------------|---|---|
| Principal Investigator (VDR) | Co. Investigator (Head of respective Department) | Head of the requesting institutions for non-Faculty of Science. |
|---------------------------------------|---|---|

FOR LAB USES ONLY

Date: Sample Received..... Analyzed.....
Technician.....
Remarks.....

* Please collect your samples within one week after collecting the results

* For more information about RSPU facility: <http://hisonano.com/rspu/>