

Bangladesh Council of Scientific and Industrial Research (BCSIR) Institute of Glass and Ceramic Research and Testing (IGCRT)

Requisition Form for XPS Analysis

(Please provide clean, dried, moisture free sample in air tight packet, Sample size for XPS analysis: around 5mm×5mm, 1-2mm thickness and for UPS analysis: 20mm×20mm, 1-2mm thickness)

<u>Precautions:</u> Samples must be clean and dry. It must not be outgassing in nature. Any material which is volatile or smelly or which may evaporate in a vacuum chamber must be avoided.

For example, samples containing Sulphur, Iodine, metallic Zinc, etc., may cause contamination.

DURATION OF SAMPLE ANALYSIS: 2 TO 4 WEEKS

1. Category of Requisition (Please ti		a) R&D project of BCSIR	b) Analytical Service
2. Number of Samples with Identification Marks:			
3. Composition of the sample:			
4. Category of the Sample (Please ti	ick): a) Pel	let b) Thin Film	c) Powder- Drop casted
J1	a) XPS b	o) Mapping c) Depth Pr	ofiling d) XPS + UPS
6. Elements to analyze:			
7. Anything Special:			
8. Special Instructions for operator for Hazardous sample (if any):			
9. Organic/polymer contents in the sample (Yes/No): (Confirmation by FTIR and TG)			
10. Is it a calcined sample? If yes, what is the calcination temperature?			
11. Purpose of the investigation:			
12. Name of the R&D project			
with duration (applicable for BCSIR):			
13. Name of the Division:			
14. Name of the Unit of BCSIR:			
15. Name of the Applicant:			
16. Designation of the Applicant:			
17. Phone No. of the Applicant:			
18. Email address of the Applicant:			
19. How will the related scientists and a) By acknowledging as co-authors in the research publications (for 01 to 04 samples)			
IGCRT, BCSIR be acknowledged?	b) By inclu	uding in the R&D officially as i	research associates (for more than 04 samples).
(Please tick): (Not applicable for Analytical		g i i i i i g i i	, , , , , , , , , , , , , , , , , , ,
Services)			
,			
	C! !		Cignotius of the Disease ICODT
Signature of the Applicant (with date)	Signatur	re of the Director of related u (with date)	nit Signature of the Director, IGCRT (with date)
(with date)		(with date)	(with date)
For Office Use Only:			
Marked To (Scientist):			
			Signature of the Project Director, SIGCRT
			Sample Receiving Date:
Completed By:			
Completed On:			