



No:

Date:...../...../.....

University of Kerala
Sophisticated Instrumentation and Computation Centre (SICC)
Kariavattom Campus, Trivandrum-695 581 Phone: 0471-2308566
E-mail:siccuok@gmail.com

Name:

Official Address/Billing.address.....

Designation: Department:

E-mail: Mobile:

Category: Kerala University Students (A) Students from colleges affiliated to UoK (B)

Students from other Educational institutions (C) R & D institutes (D)

Industry (E)

Mode of Payment*: DD

Receipt No*.: :

Date:

Certified that the sample submitted belong to the user mentioned above. I agree to acknowledge the usage of the facility in all publications arising out of the usage of the SICC. The details of publications will be intimated to the SICC. The samples may be accepted on the behalf of our department/ Institution

Date:

.....
Name and Signature of the
HOD/Principal/Guide/Director
(Office Seal is mandatory)

Important:*

- *Partially filled form and form without office seal will be summarily rejected*
- *Each page should be printed separately for submission*

Office Use only

Sample Received on:

Number of samples :

Analysis for :

Amount :

Purpose :

Name and Signature
Of the authority

400MHz NMR Spectrum Analysis Request Form

Name:

Address:

.....

E-mail: Mobile:

Sample Information

Sl No:	Sample ID	Sample type* (Solid, Powder, Liquid, Film, Bio, Others... etc. specify)	Expected Structure	Qty.	Solvent *	NMR Spectra Required*

.....
Name and Signature
of the Applicant

.....
Recommendation of
supervising teacher

.....
Name and Signature
of the Head of the Institute/Dept.
(For researchers of Kerala
University departments)

Important

- i) **Mandatory fields should not have kept blank**
- ii) **H1 sample require mini.10mg and C13 sample require mini. 30-40 mg**
- iii) ***Sample should be soluble completely, specify the exact solvent for dissolution.**
- iv) **Use sample containers for providing samples .Avoid RB flask, Conical flask , Petri Dish, Beakers etc**
- v) **Sample containers should be uniquely identified and appropriately labeled**
- vi) **Please provide the information about any specific sample preparation method required, chemicals to be used, range of instruments to be used, any literature or past analytical experience**
- vii) **Please specify nature of your sample, if your submitted sample contain toxic/flammable/ hazardous component, please attach material safety data and other details (if any) along with the sample.**
- viii) **Partially filled form and form without office seal will be summarily rejected**
- ix) **The remaining sample or sample tube should be Re-collect within One month from the date of publish of result.**