

WAZED MIAH SCIENCE RESEARCH CENTRE (WMSRC)

JAHANGIRNAGAR UNIVERSITY

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SAMPLE ANALYSIS REQUEST FORM (Common)

| \checkmark | List of Instruments/Service | Sample Identification & Analysis Parameter | |
|--------------|--|---|--|
| | X-Ray Diffraction: Single Crystal/Powder(Specify:Method) | Total No. of Sample(s): | |
| | Atomic Absorption Spectroscopy: Flame/Furnace (Specify: Metal Name & Digestion Process) | Sample Name: | |
| | HPLC/GC (Specify: Mobile Phase, Column, Condition, Preparation etc.) | Method Description/Analysis Parameter: (Specify Spectral Range/ Instrument Operational Mode/ Column & Mobile Phase/ Lens | |
| | Stop Flow Spectrometer | Information/ Solvent/ Temperature/ Time/ Amount etc.) For any query conto WMSRC Office. | |
| | a. IR: KBr/Solvent (Specify: Range) b. ATR | Solvent: | |
| | UV-Vis/Fluorescence (Specify: Solvent/Medium & Range) | | |
| | Cyclic Voltametry (Specify: Electrode, Current, Voltage and Solvent) | Spectral Range: | |
| | Elemental Analyzer: C/H/N/S | | |
| | Microscope: Polarizing/Stereo/Advanced (Specify: Lances) | Structure (for XRD)/Others*: | |
| | RT-PCR/ELISA reader/Gel documentation/Electrophoresis System | | |
| | Protein Purification System | | |
| | Water Assessment: BOD/COD/TOC/DO | | |
| | Microwave Digestion/Freeze Dryer (Specify: Time & Temperature) | | |
| | Photochemical Reactor | Sample Source (Laboratory/Manufacturer/Vendor Name)**: | |
| | Nano-Pure Water/Flake Ice (Specify: Amount) | | |
| | Oven/Muffle Furnace (Specify: Time & Temperature) | | |
| | Deep Freezer (-20°C)/ Ultralow Temperature (-80°C) | Hazard and Risk Information (if known): | |
| | Ultrasonic Bath/Water Bath/Shaking Incubator/Ultracentrifuge |] | |
| | Computational Analysis/ Others (Specify: Time / Conditions) | | |

Researcher Information

| Name of Researcher/Student/Investigator: | | | Signature: | |
|--|--|---|---|--|
| University/Institution: | | Department: | | |
| Degree Program/Purpose: | | Session/Batch/Designation: | Roll No.: | |
| Mobile Phone No.: | | E-mail: | | |
| ***I declare that I will ack | nowledge the services of Wazed Miah Se | cience Research Centre in the thesis an | d all published | |
| scientific articles. | | | | |
| Name of Supervisor: | | | | |
| Signature | e of Supervisor with Date*** | Signature of the Chairma | \mathbf{I} (With Official Seal and Date) [†] | |
| | (WMSRC Offic | e Use Only) | | |
| Request No.: | Payment Amount (tk): | | Ref. No.: | |

Received Date: Probable Delivery Date: Report Delivery to Researcher Sample Received by Analyzed By Name: Name: Name: Signature: Signature: Signature: Date: Date: Date:

Researcher's Copy

| Serial No.: |
|------------------|
| Department: |
| Submission Date: |

| Name: |
|-----------------|
| Payment Amount: |
| Delivery Date: |

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| Officer's Signature with Official Seal: | |
|---|--|
|---|--|

Note:

 ^{*}a) Opposite/Additional page can be used if necessary for method description or drawing structures.
**b) Correctly mention laboratory/researcher name directly involved in synthesis/preparation. In case of commercial sample give Manufacturer/Vendor information. *c) Mandary for thesis students/research project.
*d) Divisional Head/Chairman's authorization or WMSRC Director's approval is mandatory, otherwise request will be declined.