UIC XPS Sample Submission Form

Name________________________________________  Date__________________

Advisor’s signature (UNH only)____________________________________________

Grant #/ Company/PO#______________________________________________

Phone #_________________________________  Email________________________________________

Address (if on campus, what building?) __________________________________

Sample name____________________________  Sample composition____________________

**Service(s) Requested:**
Spectrum Analysis  Yes _____  No _____
Mapping  Yes _____  No _____
Ion Etching  Yes _____  No _____
Qualification Regions________________________________________

Quantification regions______________________________________________

**Special Sample Handling Instructions (help us help you!):**
Is sample conductive?  Yes _____  No _____
What views are of interest? ______________
What information are you hoping to obtain from this sample?______________________
________________________________________________________________________

Special Instructions:_______________________________________________________
________________________________________________________________________

**Disclaimer:**
Quoted charges are only approximations based on accepted sample preparation protocols and instrument procedures. Actual charges may vary when additional work is required (on samples) because further preparations are needed/required or because the results/data produced initially may not have been adequate/appropriate/conclusive, even though procedures were properly followed and the instruments were working correctly. Additional work may involve additional charges. If charges exceed the original estimate, work will not proceed unless approved in advance by telephone or e-mail.