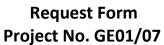


Kuwait University Nanotechnology Research Facility

UV-Visible Spectrophotometer





(Please fill all required information. The request form must be typed and not hand written)

Name of Investigator:			
Institution:		Faculty/Dept.:	
Contact:	Office	Mobile	Email
Sample Identi	ification:		
No. of Samples:		Project No.:	
Title of Projec	ct:		
Name of Technician (Student):			
Type of Proje	ct: Funded	Pilot study	Student: Bachelor Master PhD
 □ I agree to acknowledge the General Facility Project No. GE01/07 in any publication utilizing the results obtained through the Kuwait University Nanotechnology Research Facility. Note: Number of samples should not exceed 100 per year for a given project. 			
Signature of Investigator			Date
ANALYSIS TYPE REQUIREMENT (please tick all applicable): Absorbance spectrum. Determination of concentration of sample (stock solution of known concentration must be provided).			
SAMPLE DETAILS: - If the sample is in solid state, then specify the solvent			
- Specify UV range if known			
- Is there any health risk while handling the sample? (Please specify)			
For Lab Use Only			
Name & Signat	ure of Operator:		Date:
Signature of Di	rector:		Date: