

Kuwait University Nanotechnology Research Facility

X-RAY FLUORESCENCE SPECTROMETER (WDXRF)

Request Form Project No. GE01/07



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

Name of Investigator:			
Institution:		Faculty/Dept.:	
Contact: Offic	e	Mobile	Email
Sample Identificati	on:		
No. of Samples:		Project No.:	
Title of Project:			
Name of Technician (Student):			
Type of Project:	☐ 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
SAMPLE DETAILS: - Types of sample (Solid, Film, Powder or Liquid) - Sample preparation (Grinding, Polishing, Milling or Pelleting)			
- Specify elements of interest			
- Specify the expected range of concentration for those elements			
- Is there any health risk while handling the sample? (Please specify)			
Note: Provide the standards and blanks of specific interest of the elements if required.			
For Lab Use Only			
Name & Signature of Operator:			Date:
Signature of Director:			Date: