

BENCHTOP SCANNING ELECTRON MICROSCOPY (SEM) BOOKING FORM

A) APPLICANT'S INFORMATION							
NAME				STUDENT ID/ STAFF ID (UiTM APPLICANT)			
TEL. NO (DIRECTLINE, H/P)				EMAIL			
UNIVERSITY/FACULTY/ COMPANY ADDRESS							
STATUS	<input type="checkbox"/> MASTER STUDENT <input type="checkbox"/> PHD STUDENT <input type="checkbox"/> RESEARCHER <input type="checkbox"/> INDUSTRY <input type="checkbox"/> OTHERS						
B) SUPERVISOR'S INFORMATION (UNIVERSITY'S APPLICANT ONLY)							
NAME				STAFF ID (UITM APPLICANT)			
TEL. NO (DIRECTLINE, H/P)				EMAIL			
SUPERVISOR'S SIGNATURE & OFFICIAL STAMP				GRANT NO			
C) SAMPLE INFORMATION							
NO.	SAMPLE ID & SAMPLE TYPE	CHEMICAL FORMULA	HAZARDOUS	TOXIC	CORROSIVE	HYGROSCOPIC	ANALYSIS
			(TICK WHICH IS APPLICABLE)				
							<input type="checkbox"/> Surface <input type="checkbox"/> Cross Section
							<input type="checkbox"/> Surface <input type="checkbox"/> Cross Section
							<input type="checkbox"/> Surface <input type="checkbox"/> Cross Section
For measurements magnification, please give additional details (if any): (Maximum Magnification 100,000x)							
SEM MEASUREMENT		UiTM	IPTA	IPTS	INDUSTRY	TICK HERE (/)	
IMAGING (PER SAMPLE)		RM 150	RM 200	RM 250	RM 300		
IMAGING + EDX (PER SAMPLE)		RM 250	RM 300	RM 350	RM 400		
IMAGING + EDX + MAPPING (PER SAMPLE)		RM 300	RM 350	RM 400	RM 450		
I/we hereby declared that the materials to be used with the machines/equipments have the PHYSICAL AND CHEMICAL property(s) as mention below. I and my supervisor will be held fully responsible for the damaged to the machine due to false declaration(s). I/we hereby acknowledge and agree with the charge of SEM analysis imposed by CFMN, Institute of Science, UiTM.I/we will held the responsibility if the bursary fail to deduct from the research grant declared. For any decline or refused charge from the declared grant, the supervisor will be held the responsible for the settlement charge.							
Applicant's Signature : _____				Date : _____			
FOR OFFICE USE ONLY				TERMS & CONDITIONS			
APPLICATION STATUS : ACCEPT/REJECT		DATE COMPLETED: -----		1. Please submit the completed application form via email: sitia820@uitm.edu.my 2. The sample must be stable (not reactive, toxic or corrosive) 3. The sample must be very dry in order to be placed in high vacuum. 4. Maximum of 3 samples only allowed for each application. 5. Please attach journal related to the sample as an example for comparison. 6. All payments must be made before results can be taken.			
SIGNATURE/DATE : -----		TOTAL CHARGE: RM					