



**INSTRUMENT USAGE REGISTRATION FORM
CENTRE FOR SUSTAINABLE NANOMATERIALS
UNIVERSITI TEKNOLOGI MALAYSIA**

INSTRUMENT BOOKING PROCEDURE

Please read the information below before completing the application form.

1. Maximum Number of Samples

Only **THREE (3)** maximum samples per booking per instrument will be approved except for the Microscopy Instruments such **LVSEM(4)**, **FESEM(3)** and **TEM(2)**.

Note: **XRD, TEM (powder type only)**

2. Booking

- a. Complete the application form including valid research vot number (if available**)
- b. The application form is valid only for ONE (1) type of analysis equipment. Use other form for other analysis instrument.
- c. A completed application form must be submitted to the CSNano Administration Office together with the proof of the payment. CSNano has the right to reject any incomplete application form.
- d. All booking schedule can be updated on the next working Monday based on the received date by email.
- e. Intended new booking of the same instrument for the same applicant is only available **AFTER** the current analysis is being completed.
- f. Additional samples are not allowed for every analysis session.

****Note: If valid research vot. Number is not available; kindly attach official letter requesting for the analysis from your respective head of department. The amount will be charged onto respective department/faculty vot.**

3. Sample condition and preparation

- a. Details of the sample should be informed in this application form including samples description, expected result and instrument to be used for the analysis.
- b. All samples should be in ready to analyse condition when submitted to the CSNano. All preparation needs must be supplied by the applicant. All preparation and it needs for analysis prepared by CSNano will be charge accordingly.
- c. CSNano has every right to cancel any analysis if the sample is suspected to have high risks on the safety of the operator or can cause damage to the instrument during the analysis.
- d. All inquiries regarding sample preparation, its needs and analysis should be forwarded to the Science Officer In-charge **BEFORE** submit the application form:
Mr. Mohamed Mohd. Salleh – Electron Microscopy and Physics
Mrs. Nur Azleena Kasiran – Chemistry

4. General Rules

- a. All information provided should be true.
- b. Users need to attend the related training when deemed necessary.
- c. Users should obey all rules and regulations regarding safety and laboratory requirements at CSNano.
- d. Users should inform the CSNano administration office if there are any changes in their vot number or expiry date of their research projects.

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Reference No.:

APPLICANT DETAILS
NAME: _____ ID NO: _____
DEPARTMENT/ FACULTY: _____
E-MAIL: _____ PHONE NO: _____
RESEARCH TITLE: _____
RESEARCH PROJECT LEADER: _____ Date: _____ (Name/Signature/Stamp)
PAYMENT METHOD
<input type="radio"/> RESEARCH GRANT Vot Number: _____ Vot Expiry Date: _____ Balance of V29000: RM _____ (Please provide a copy of Financial Statement) I hereby agree to transfer RM _____ from VOT NO: _____ to CSNano VOT NO: 260900/69252 for the measurement/characterization service supplied CSNano.
<input type="radio"/> MONEY ORDER: Pay to BENDAHARI UTM , RM _____ (UTMFIN REF. NO.: _____)
<input type="radio"/> CASH: RM _____
REQUIREMENTS
INSTRUMENT REQUESTED:
<input type="checkbox"/> TEM <input type="checkbox"/> SEM <input type="checkbox"/> FE-SEM <input type="checkbox"/> XRD <input type="checkbox"/> ESR <input type="checkbox"/> TGA <input type="checkbox"/> LIQUID NMR <input type="checkbox"/> DMA <input type="checkbox"/> OTHERS (Please state the equipment required): _____
SAMPLE DESCRIPTION:
<input type="radio"/> Type of Sample(s): <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gel <input type="checkbox"/> Thin Film <input type="radio"/> No of Sample(s): _____
MEASUREMENT CONDITION OR REQUIREMENT: _____
EXPECTED RESULT: _____
I have read and accept the Instrument Booking Procedure Policy.
Applicant Signature: _____ Date: _____

REMARKS

For payment by **Research Grant**, please follow the following procedures:

- Please fill out this form completely and return it to the CSNano Administration Office
- CSNano will issue the invoice within 1-2 working days
- Applicant should take the invoice and submit to RMC for payment matter
- Once RMC completed processing the invoice, RMC will issue the "Slip Penerimaan Dokumen"
- The slip must be attached at the application form including financial statement from your supervisor
- Laboratory Department will send you a notification email for further action

FOR OFFICE USE ONLY

a) CSNano Administration Office

Application Form Received Information from User:

Signature: _____ Date: _____

b) CSNano Laboratory Management Chairman

Application Form Received Information from Administration Office:

Signature: _____ Date: _____

Application Status: Approved Rejected

○ If Rejected, Remarks: _____

c) CSNano Administration Office

Application Form Received Information from Laboratory Management Chairman:

Signature: _____ Date: _____

d) Laboratory Department

Application Form Received Information from Administration Office:

Signature: _____ Date: _____

Decision for Measurement:

- **Date / Time of Slot:** _____
- **Email Notification Date:** _____
- **Remark:** _____

Analysis Completed Date: _____

- **Remark:** _____

e) User Signature

Sample Analysis Received Information:

Signature: _____ Date: _____

*Upon signed this document, I have agreed to receive the result(s) of the measurement.

