

## Mark Wainwright Analytical Centre Solid State and Elemental Analysis XRF Laboratory

## **Request for Oxygen Analysis**

ontact Phone Supervisor's Phone Supervisor's Email			School / Depa	rtment	
Intact Email  Supervisor's Email  Supervisor's Email  Supervisor Small  Supervisor Small  Supervisor Charges:  * 1. Project Code  * 1. Signature (authorizing charges) or date of email (email authorizing charges)  * 4. Supervisor ORCID  * 3. Dept ID  * 3. Sample No. and Description:  1 2 3 3 4 5 6 6 7 7 7 8 7 8 8 9 7 8 9 7 8 9 8 9 9 9 9 9	Analysis requested by		Supervisor's N	lame	
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Do you want the sample/s returned?  Yes  No  Notes  Recommended sample weight is 100mg but may be more or less depending on samples. Please discuss wixer staff.  Please submit a complete list of sample numbers. For large batches, please number samples consecutively  NB. The analysis request is not complete unless the account details are provided  * PLEASE CHECK THAT FUNDS ARE AVAILABLE BEFORE SUBMITTING REQUEST FORM  PLEASE COLLECT SAMPLES WITHIN 2 WEEKS OF ANALYSIS COMPLETION - SAMPLES WILL NOT BE KE  * All users are kindly reminded to acknowledge the XRF laboratory or the SSEAU, MWAC, in publications resulting from the use of our facilities. This provides a way to measure our impact essential for the XRF laboratory's continued support and expansion of capabilities.  Office Use Only	6				
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## **Additional samples**

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