For external users

DEPARTMENT OF CHEMISTRY, IIT MADRAS

ESI - MS FACILITY

User Information

Name of the student: _____ Billing Name: _____

Name of the Guide : _____ Email ID : _____

Name of the Institute: _____ Contact No : _____

_____

Sample information

Analysis Required: ESI in ☐ +ve/ ☐ -ve mode

(tick your choice) ☐ Unit mass (ex:355)

☐Exact mass (ex:355.2564)

S.NO	Sample code	Mol.Wt	Mol.Formula	☆Solvent (MeOH,DCM,CH3CN, Water,others)
Special instruction if any:				

Signature of the Student

Signature of the Guide with Seal

Date: UPI Transaction ID: Amount:

For office use only

Received on:

Analysed on:

Department of Chemistry, IIT Madras

HRMS

Requisition Form (Internal Users)

User Information

Name: Date:

Email: Lab Phone:

Research Guide:

Required Mode: positive/negative Required Range:

Sample Details

Sl. No	Sample Code	M.Wt	Molecular Formula*	Solvent	Any other Information	Office use only

(*Provide expected structure at the back of this form)

Signature of the Guide Signature of Operator

Date of Completion

cut here

Department of Chemistry, IIT Madras

HRMS

Requisition Form (Internal Users)

User Information

Name: Date:

Email: Lab Phone:

Research Guide:

Required Mode: positive/negative Required Range:

Sample Details

Sl. No	Sample Code	M.Wt	Molecular Formula*	Solvent	Any other Information	Office use only

(*Provide expected structure at the back of this form)

Signature of the Guide Signature of Operator

Date of Completion