



Kuwait University
Nanotechnology Research Facility
SAMPLE PREPARATION
Request Form
Project No. GE01/07



Name of Investigator:

Institution:

Faculty:

Address:

Telephone:

Fax:

Email:

Sample Identification:

No. of Samples:

Project No.&

Project title:

Name of Technician:

I agree to acknowledge General Facility project no GE01/07 in any publication utilizing any results obtained through Kuwait University Nanotechnology Research Facility.

Signature of Investigator **Date**

EQUIPMENTS USED FOR SAMPLE PREPARATION : (please write below)

- 1.
- 2.
- 3.

SAMPLE DETAILS:

- Please provide more details about the sample
- Please provide details about chemicals used from KUNRF.
- Is there any health risk while handling the sample? (Please specify)

For Lab Use Only

Name & Signature of Operator:..... **Project ID #**

Signature of Director..... **Date:**