



TGA/DSC Facility
Department of Chemistry
Central University of Tamil Nadu, Thiruvavur-610 005

Requisition Form

Instrument Make: PerkinElmer (Model: STA8000 (Simultaneous Thermal Analyzer))

User Information

Name of the user:

Department:

Organisation:

Mobile No:

E-Mail:

Name of Supervisor & Designation:

User Category: Internal / External Academic institution / R&D

Number of Samples:

Atmosphere (N₂ / O₂

Description of sample:

Sl. No	Sample Code	Chemical composition	Temperature range From RT (35 ^o C to _____ ^o C.	Boiling point / Flash Point Temp.	Remarks
1					
2					
3					
4					

- Nature of Sample (Organic/ Polymers/Composites etc. Kindly mention the identity of analyte):
- Melting point of analyte:
- Flammability in the presence of oxygen: YES / NO
- Whether the analyte releases TOXIC/ CORROSIVE gases at elevated temperature? YES / NO (If YES mention the gases):
- Whether the analyte itself toxic? YES / NO (If YES, mention the precautions that have to be taken care of during sample handling):

Note: 1. Analysis charges vary with respect to scan temperature and scan rate.

2. Maximum samples that can be accommodated in request form are limited to **FOUR**. If in the case of more than Four samples submit multiple forms for every Four samples.

3. **Samples Submission** - Minimum 5-10 mg of sample required and it should be a dry powder.

4. **Payment:** Send the online fee payment receipt along with the request form. Your slot will be confirmed only after receiving samples and payment receipt.

Declaration:

The details of the sample I provided are true. The nature of sample upon heating will not explode or release a significant amount of gaseous product resulting to the damage of the instrument. I understand that I am aware of the fact that if the instrument is damaged due to running of my sample, I will be held responsible. | Extra charges will be levied in case of any damage/ contamination of the crucible due to the sample's nature.

Signature of the user

Signature of the
Supervisor/Head with Seal

Date:

FOR OFFICE USE ONLY:

Payment Ref.No	Date of Payment	Amount	Remark

Serial No. of sample: _____ sample received on: _____ File : _____ result sent on : _____

Signature of the Technical In-charge

Signature of the Head with seal