

Request for Analysis on Atomic Absorption Spectrophotometer (AAS)

IESE Student/Faculty

Other School's Student/Faculty

Commercial

Name: _____ Designation: _____

Department/Organization: _____

Contact Number: _____ Email: _____

Project/Research Supervisor: _____

Project/Research Title: _____

Metals to be Analyzed:

Fe

Zn

Pb

Cd

Cr

Na

K

Sample Source/Type: _____

Number of Samples: (No. of Metals _____ × Sample(s) _____ = Total Samples _____)

Are samples properly filtered: Yes No Remarks _____

Are samples properly digested: Yes No Remarks _____

Method of Digestion: _____

Expected Range of Results ($\mu\text{g/l}$ or mg/l): _____

Approval from initiating Department/School/Organization:

Supervisor/Head: _____ Designation: _____	Sign and Stamp: _____ Date: _____
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Approval from SCEE (IESE):

Focal Person – AAS

Associate Dean

Sign and Stamp: _____ Date: _____	Sign and Stamp: _____ Date: _____
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Remarks (if any): _____

Sample(s) Submission Date: _____

Lab Engr/Demo

Note:

- A maximum of five (05) samples will be analyzed on one request form.
- The sample should be well prepared, well digested, and properly filtered before submission, otherwise it will not only affect the results but can also cause damage to the AAS equipment.
- Payment receipt/invoice of the deposited amount (as per number of samples) must be submitted with this request form.
- For queries please contact Mr. Awais Javaid (Tel: 051-8864280 / Email: lab.demo2@iese.nust.edu.pk).