

APPLICATION FORM



GC-MS TESTING & ANALYSIS SERVICE

For Laboratory Use Only

Ref. no. GC-MS/A/20___/

Quotation no. Date completed

Received date

| | | | | Date comple | ilea . | | |
|---|----------------|----------|-------------------|--|------------------|----------|--|
| | APPLICANT INFO | RMATION | | SA | MPLE INFORM | ATION | |
| NAME | E : | | | No. of sample submission: | | | |
| SUPERVIS | ERVISOR : | | | Please ($\sqrt{\ }$) at the relevant box: | | | |
| MATRIX NO : Please (√) at the relevant box: □ RESEARCH ASSISTANT □ UNDERGRADUATE / PROJECT STUDENT □ POSTGRADUATE (Master/PhD) □ OTHERS (Postdoctoral/lecturer) | | | IT | Sample handling: ☐ Store in freezer ☐ Stench chemicals. Store in tight seal container keep in vented cabinet. | | | |
| CONTACT NO. : | | | Ca | Carcinogenic ☐ Yes ☐ No | | | |
| EMAIL | : | | 102 | ac | ⊔ Yes | □ No | |
| | | DET | AILS OF ANALY | 'SIS | | | |
| Γ | | | | Ton | nperature progra | am °C | |
| _ | Sample code | Solvent | Mass Range | Oven | Injector | Detector | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| - | | | | | | | |
| _ | | | | | | | |
| - | | | | | | | |
| - | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | CONFIRMA | TION OF USING | SERVICE | | | |
| | | | 2 2 2 2 3 3 4 4 4 | | | | |

| CONFIRMATION OF USING SERVICE | | | | | | |
|-------------------------------|-----|------|---|--|--|--|
| Applicant signature | : , | Date | : | | | |



APPLICATION FORM



RESEARCH FUND INFORMATION

(1) For HIR, please issue Journal Transfer Form and complete the form. Send a copy of completed form to GC laboratory. For Internal Grant (UMRG, PPP,BKP,.) and External Grant (SCIENCE Fund, FRGS,.)

Please do fund transfer to

Account : BUKU PETUNJUK JABATAN KIMIA J-21030-UM.0000003/KWJ.NP.BP

Revenue Code : H724001

Description : Usage of GC-MS instrument Amount : As per service charge

(2) Service charge as follow. For latest charge please refer to Chemistry Department Central Facility Website: cenfac.um.edu.my

| | Price (RM) | | | | | | |
|-------------------------|--|--|-----------------------|----------------------------|--|--|--|
| GC-MS | Package A Sample Analysis 1 Day (9:00 a.m. – 5:00 p.m.) | Package B Per Slot of 3 hours 9.00 a.m. – 12.00 p.m.; 2.00 p.m. – 5.00 p.m. | Package C Per year | Package D Per injection | | | |
| Chemistry Department | 120 | 60 | 750 | 40 | | | |
| UM User | 200 | 80 | - | 50 | | | |

(3) The print-out Invoice Commitment must be approved by Supervisor and Head of Department.

(4) Please submit together with the application form.

We agree to make the payment in accordance to the service charge issued by Department of Chemistry, Faculty of Science, University of Malaya

RESEARCH GRANT NAME : RESEARCH GRANT NO. :

SUPERVISOR'S SIGNATURE : DATE :

& OFFICIAL STAMP

IMPORTANT INFORMATION

Sample must not contain water

- 2. For Mass Spec please refer to technical specification as stated in Cenfac website
- 3. User(s) are required to retrieve all the samples after analysis

For any queries please contact:

| Resource person | Name | Phone | Email |
|---------------------------|--------------------|--------------|---------------------|
| Assistant Science Officer | Hashim Mohd Salleh | 03-7967 4251 | hashims@um.edu.my |
| Senior Science Officer | Norzalida Zakaria | 03-7967 4245 | norzalida@um.edu.my |

C13 MAKMAL GC-MS
BLOK A
Chemistry Department
Faculty Of Science
University Of Malaya
50603 Kuala Lumpur, Malaysia