

APPLICATION FORM

FORM A
Page 1 of 2

RHEOMETER TESTING & ANALYSIS SERVICE

For Laboratory Use Only

Received date :

Ref. no. : RHEOM/A/202___/

Quotation no. : Date completed :

APPLICANT INFORMATION				SAMPLE INFORMATION				
NAME SUPERVISOR MATRIX NO	: Please (√) at the relevant box: □ RESEARCH ASSISTANT □ UNDERGRADUATE / PROJECT STUDENT □ POSTGRADUATE (Master/PhD) □ OTHERS (Postdoctoral/lecturer)				Types of sample Adhesive, sealant Asphalt Coating Emulsion Food Gel Petrochem Polymer, Resin Suspension		Solid / semi solid measuring plate (a) Parallel & plate □ PP15 □ PP25 □ PP50 (b) Cone plate □ CP50-1 Liquid measuring system □ Cylinder double gap c-DG26.7 □ Coaxial cylinder CC27	
CONTACT NO.	:							
EMAIL :								
			DETAILS OF A	NALYSIS				
Sample ID	Shear rate	Shear rate Speed Deflection angle		Strain		Type of measurement ¹		
Sample 1D	γ	n	φ	γ	Flow	Oscillation	Time	Temperature
¹ Please ($\sqrt{\ }$) at rela	nted analysis							
			CONFIRMATION OF	USING SERV	ICE			
Applicant s	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 AAS 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 Rheometer 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

Equipment	Price (RM/sample/hour)					
	Chemistry Department	Collaboration	Faculties within UM			
Rheometer	30	60	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

1. Prior to slot booking and analysis user are required to make an appointment with lab personnel to further discuss on details of analysis and available accessories.

For any queries please contact:

Resource person	Name	Phone	Email	
Assistant Science Officer	Siti Haizura Md Salleh	03-7967 7022 ext. 2125	haizura@um.edu.my	
		03-7967 7115		
Science Officer	Nur Izzati Abdol Rasol	03-7967 4067	n izzati@um.edu.my	

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