PROPOSAL

for measurements at ProVIS - Centre for Chemical Microscopy



General Information

Applicant / Contact person:

E-mail:

Phone:

Fax:

 ${\sf Institution}/{\sf Department}:$

Postal address:

People involved in the project:

Project

Project title:		
Key words:		
Estimated analysis time:	days (leave blank if unknown)
Earliest start of the project:	(dd.r	nm.yyyy, or 'as soon as possible' etc.)
required instruments:		
Fluorescense microscope	nanoSIMS	
Laser-Microdissection	ToFSIMS	MALDI-ToF (Bruker)
Confocal Raman	ICP-MS (Neptun)	FTICR-MS
Electron microscope	ICP-MS (SPECTRO)	Orbitrap nLC-MS/MS
He-ion microscope	Laser-Ablation	

ProVIS - Centre for Chemical Microscopy, Helmholtz Centre for Environmental Research - UFZ, Permoserstrasse 15, 04318 Leipzig

Abstract:

Expected scientific impact:

Samples

Number of samples (if known)

Sample preparation required:

(NO=analysis only)

Type of samples

Description of analysis:

Analysis similar to previous measurement

Additional information provided

Return samples after analysis

Special handling of samples required

DATE, SIGNATURE (APPLICANT)

With my signature I accept that this proposal will be discussed internally within the ProVIS team. The proposal will be treated confidentially.

Agreement on internal cost invoicing (UFZ internal applications only)

DATE, SIGNATURE (HEAD OF DEPARTMENT)

With my signature I accept that the costs will be internally invoiced (ILV) to the applying department.

SEND THE FILLED FORM VIA EMAIL TO office.provis@ufz.de PLEASE PRINT AND SIGN A COPY OF THIS FORM AND PROVIDE IT WITH YOUR SAMPLES.

ProVIS - Centre for Chemical Microscopy, Helmholtz Centre for Environmental Research - UFZ, Permoserstrasse 15, 04318 Leipzig