

ELEMENTAL ANALYSIS LABORATORY (EAL)

CHNS Request Form

Submit samples to NUS, 3 Science Drive 2, S5-02-17, Singapore 117543. Tel: 65164438
(Lab is open from Mon to Fri 830 to 6pm, except 530pm on Friday. Avoid 1-2pm. Sat/Sun closed)

(Revised on 2017)

Supervisor's name
& signature:

Category (Tick)

NUS Chemistry

Non-Chemistry : _____

Requestor's name:

Billing address (non-NUS addresses only)

Email (for results publication) :

@u.nus.edu

Contact No:

S()

Sample Handling Requirements

Call for Sample		Dry Box		Light Sensitive		Explosive	
Fridge		Volatile		Air Sensitive		Toxic/ Carcinogenic	

Only for CHNS samples - Minimum Quantity of Sample: 3mg

* Results are highly affected by presence of solvent & water content. Dry/remove solvent thoroughly before submission.

Abbreviation:

R - Your sample ID (10 characters max)

F - Sample Formula

M - Molecular Weight

E - Your expected CHNS values

A - Actual analyzed values (for EAL staff use only)

- Tick accordingly to required elements

	Sample Information		C% <input type="checkbox"/>	H% <input type="checkbox"/>	N% <input type="checkbox"/>	S% <input type="checkbox"/>
R		E				
F		A				
M		A				
R		E				
F		A				
M		A				
R		E				
F		A				
M		A				

Remarks: _____ Report Out:

Note: The services provided are purely for scientific purposes and are not to be used in any court of law

	Sample Information		C%	H%	N%	S%
R		E				
F		A				
M		A				
R		E				
F		A				
M		A				
R		E				
F		A				
M		A				
R		E				
F		A				
M		A				
R		E				
F		A				
M		A				
R		E				
F		A				
M		A				

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