

TOTAL AMOUNT (RM):

FACULTY OF SCIENCE AND MATHEMATICS UNIVERSITI PENDIDIKAN SULTAN IDRIS

Tel: 015-4879 7314 / 7305 (P)|Fax: 015-4879 7296

Email:instrumenfsm@upsi.edu.my

| 20_ | _/FSM/IC/() | |
|-----|---------------------|--|
| | No Rujukan JPPS | |
| 20_ | FSM/J/ | |
| | (BIL/) | |
| UP | SI/FSM/JPPS(Pin 04) | |

| APPLICATION FOR SAMPLE ANALYSIS HIGH PERFORMANCE ION CHROMATOGRAPHY (HPIC) | | | | | |
|--|--------------------------|--|--|--|--|
| ICS 2100 (ANION) | | ICS 1100 (CATION) | | | |
| PART A: APPLICANT INFORMATION | | | | | |
| Applicant Name : | Phone No. : Department : | | | | |
| Vot / Grant No. | | Current Balance | : | | |
| | uate (coursework @ | | External | | |
| PART B: SAMPLE INFORMATION Number of Sample : Sample Type : Sample Properties : | Sample Name | No vial | Sample Name | | |
| PART C: DECLARATION | | | | | |
| STUDENT / STAFF DECLARATION | eur | DERVISOR / LECT | TIDED DECLADATION | | |
| I acknowledge that all information given above is true. be responsible for any damages that occurred due falsification of the information. | . I will | SUPERVISOR / LECTURER DECLARATION I acknowledge that this student is under my supervision. * I agree to pay the cost set by the Faculty of Science and Mathematics. *(If Applicable Only) | | | |
| (Signature) Name : Date : | Name Date | (Signature & Stamp) : | | | |
| PART D: APPROVAL BY SCIENTIFIC INSTRUMENT COORDINATOR APPROVAL BY SCIENTIFIC INSTRUMENT COORDINATOR : APPROVED / NOT APPROVED Reason if not approved : | | | | | |
| (Signature & Stamp) Name : Date : | | | | | |
| OFFICE USE | | | | | |
| Operator Name : Received Date : | | | RM15.00/sample/run (Column and standard | | |
| Completed Date : : | | UPSI | prepared) RM30.00/sample/run (Without Column & | | |

External

Urgent

Analysis

(Internal & External)

RM50.00/sample

RM70.00/sample