



**PUSAT PENGURUSAN MAKMAL  
UNIVERSITI (PPMU)**

Form Num.	UIRL/F/02
Revision No.	1/2023
Effective Date	01/02/2023
Equipment	FESEM & VPSEM
Sample Serial No.	

**MICROSCOPY & IMAGING LABORATORY  
SAMPLE SUBMISSION FORM**

**General Rules and Requirements:**

- All information provided should be true.
- Booking will be notified/updated by email.
- Booking procedure
  - Complete the application form including valid research vote number.
  - Submit the complete application form to UIRL Sample Acceptance Counter.
  - Fast Lane is offered to non-UTM customers with an additional 50% charge from the normal price**
- Sample Condition & Preparation
  - PPMU has the right to cancel any analysis if the sample is suspected to have a high risk on the safety of the operator or can cause damage to the instrument during the analysis. The cost of damage will be borne by the customer.**
  - Only samples that ready to be analyzed were accepted by the lab.
  - The remaining samples will be disposed of within a month after analysis is completed.**
- All inquiries regarding **FESEM/VPSEM** should be forwarded to the Assistant Engineer (Mr. Ahmad Safuan Borhan, email: [a.safuan@utm.my](mailto:a.safuan@utm.my), tel.: 07-561 0268) / Assistant Engineer (Mr. Al Azhari Amir Hatib, email: [alazhari@utm.my](mailto:alazhari@utm.my), tel.: 07-561 0268) / Assistant Science Officer (Mrs. Anis Asyikin Sukari, email: [anis.asyikin@utm.my](mailto:anis.asyikin@utm.my), tel.: 07-561 0268) or visit our website at [ppmu.utm.my](http://ppmu.utm.my).

1. APPLICANT'S PERSONAL PARTICULARS									
Name of Applicant									
Status of Applicant	<input type="checkbox"/> Undergraduates	<input type="checkbox"/>	<input type="checkbox"/> Master	<input type="checkbox"/>	<input type="checkbox"/> PhD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Researcher
Student Matric No.									
Faculty/Department									
Hand Phone No. & Email									
2. SUPERVISOR DETAILS									
Name of Supervisor									
Staff ID No.									
Faculty/Department									
Hand Phone No.									
Email									
Mode of Payment	<input type="checkbox"/> Cash	<input type="checkbox"/>	<input type="checkbox"/> EFT	<input type="checkbox"/>	<input type="checkbox"/> Log card	<input type="checkbox"/>	<input type="checkbox"/> Invoice	<input type="checkbox"/>	<input type="checkbox"/> Fast Lane
*Payment using invoice	Research Vot No. (e.g.: Q.J091600.24C3.01D32)								
	Balance of V29000								
Signature & Official Stamp	*A digital signature is not recommended. Any matters raised in the future are beyond our responsibilities.								
3. SAMPLE INFORMATION									
Type of samples	<input type="checkbox"/> Biology	<input type="checkbox"/>	<input type="checkbox"/> Material						
Name of samples									
No. of Samples									
Already Done sample Preparation	<input type="checkbox"/> Yes	<input type="checkbox"/>	<input type="checkbox"/> No						
Test Required	<input type="checkbox"/> FESEM	<input type="checkbox"/>	<input type="checkbox"/> VPSEM	<input type="checkbox"/>	<input type="checkbox"/> EDX	<input type="checkbox"/>	<input type="checkbox"/> SPUTTER COATER		
Type of EDX Testing	<input type="checkbox"/> Point & Id	<input type="checkbox"/>	<input type="checkbox"/> Line Scan	<input type="checkbox"/>	<input type="checkbox"/> Mapping				
EDX Result Information	<input type="checkbox"/> Atomic	<input type="checkbox"/>	<input type="checkbox"/> Weight	<input type="checkbox"/>	<input type="checkbox"/> Full Quant				
Expected Element/ Chemical formula									
Description / Notes									