

 UTM UNIVERSITI TEKNOLOGI MALAYSIA	PUSAT PENGURUSAN MAKMAL UNIVERSITI (PPMU)	Form Num.	UURL/F/146
		Revision No.	1/2024
		Effective Date	01/03/2024
		Equipment	MICRO CT SCAN
		Sample Serial No.	UURL/
MICRONANO FABRICATION & MACHINING LABORATORY			
SAMPLE SUBMISSION FORM			

General Rules and Requirements:

1. All information provided should be true
2. Booking will be notified/updated by email
3. Booking procedure
 - a. Complete the application form including valid research vote number
 - b. Submit the completed application form to UURL Sample Acceptance Counter
 - c. **MAXIMUM NUMBER OF SAMPLES : 7 SAMPLES PER BOOKING**
 - d. **Fast Lane is offered to non-UTM customers with an additional 50% charge from the normal price**
4. Sample Condition & Preparation
 - a. Samples preparation need to be done by applicant before submission
 - b. **PPMU has the right to cancel any analysis if the sample is suspected to have high risk on the safety of the operator or can cause damage to the instrument during the analysis. The cost of damages will be borne by the customer.**
 - c. **The remaining samples will be disposed of within a month after analysis is completed.**
5. All enquiries regarding **MICRO CT SCAN** should be forwarded to the Science Officer (Mrs Nurnazmin Mohd Nordin, email: nurnazmin@utm.my, or Asst. Science Officer, Mrs Siti Nor Asyiqin, email: sitonorasyiqin@utm.my, tel: 07-557729) or visit our website at ppmu.utm.my.

1. APPLICANT'S PERSONAL PARTICULARS									
Name of Applicant									
Status of Applicant	<input type="checkbox"/> Undergraduates	<input type="checkbox"/> Master	<input type="checkbox"/> PhD	<input type="checkbox"/> Research					
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"/> EFT	<input type="checkbox"/> Log card	<input type="checkbox"/> Invoice	<input type="checkbox"/> Fast Lane				
*Payment using invoice	Research Vot No. (e.g.: QJ091600.24C3.01D32)								
	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"/> Powder	<input type="checkbox"/> Solid	<input type="checkbox"/> Bulk	<input type="checkbox"/> Gel					
Name of samples									
No. of samples									
Sample Properties	<input type="checkbox"/> Normal	<input type="checkbox"/> Toxic	<input type="checkbox"/> Carcinogenic						
Types of Scanning	<input type="checkbox"/> Spectroscopy	<input type="checkbox"/> CT Scan							
Type of Measurement (Spectroscopy)	<input type="checkbox"/> BGA	<input type="checkbox"/> Area Ratio	<input type="checkbox"/> Wire Sweep Ratio						
	<input type="checkbox"/> Dimension	<input type="checkbox"/> Three-Point							
Description / Notes									