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|  UTM UNIVERSITI TEKNOLOGI MALAYSIA | PUSAT PENGURUSAN MAKMAL UNIVERSITI (PPMU) | Form Num. | UURL/F/42 |
| | | Revision No. | 1/2023 |
| | | Effective Date | 01/02/2023 |
| | | Equipment | METALLURGICAL MICROSCOPE |
| | | Sample Serial No. | UURL/ |
| 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 UURL 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.**
 - The remaining samples will be disposed of within a month after analysis is completed.**
- All inquiries regarding **METALLURGICAL MICROSCOPE** should be forwarded to the Assistant Science Officer (Mrs. Norshilyla Binti Mohd Jailani, email: norshilyla@utm.my, tel.: 07-561 0267, Miss. Anis Syikin Binti Sukari, email: anis.syikin@utm.my, tel.: 07-561 0268) 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 | <input type="checkbox"/> | |
| Student Matric No. | | | | | | | | | | |
| Faculty/Department | | | | | | | | | | |
| Hand Phone No. & Email | | | | | | | | | | |
| 2. SUPERVISOR DETAILS (for internal applicant and academic institution only) | | | | | | | | | | |
| 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. (eg: 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 Sample | <input type="checkbox"/> | Powder | <input type="checkbox"/> | Solid | <input type="checkbox"/> | Bulk | <input type="checkbox"/> | Gel | <input type="checkbox"/> | |
| Name of Sample | | | | | | | | | | |
| No. of Sample | | | | | | | | | | |
| Sample Properties | <input type="checkbox"/> | Normal | <input type="checkbox"/> | Toxic | <input type="checkbox"/> | Carcinogenic | | | | |
| Already Done Sample Preparation | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | | | | | | |
| Magnification to be Used | <input type="checkbox"/> | 5X | <input type="checkbox"/> | 10X | <input type="checkbox"/> | 20X | <input type="checkbox"/> | 50X | <input type="checkbox"/> | |
| Testing Required | <input type="checkbox"/> | EFI | <input type="checkbox"/> | MIA | <input type="checkbox"/> | MEASUREMENT | | | | |
| Result Information | <input type="checkbox"/> | Full Report | <input type="checkbox"/> | Workbook | | | | | | |
| Description / Notes | | | | | | | | | | |