**CENTRAL HI-TECH LAB (CHL)**

# Government College University, Faisalabad (GCUF)

Ground Floor, Iqbal Block, New Campus



## Ph: +92-41-9203013 Allama Iqbal Road

38000-Faisalabad, Pakistan



**SAMPLE SUBMISSION FORM FOR ATOMIC ABSORPTION SPECTROPHOTOMETER**

## Name (Researcher / Faculty Member / Contact Person):

Department and University / Organization:

Contact Details: Ph # Cell # Email:

Analysis Charges Paid: Yes / No (If No, the sample will not be processed)

If, Yes: Challan # Date: Amount Paid:

Bank, Branch and Address (from where the payment has been made):

### (Note: One copy of original receipt must be attached with the sample submission form for CHL internal record)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sr.No.** | **Must Be Filled While Submitting the Sample(s)** | | | | **For CHL Use Only** | | | |
| Reference/ Sample Name / ID | Condition and volume of samples | Results required of following Elements | Remarks | Sample ID | Analysis  Date | Analyst Name | Remarks |
| 1 |  |  | Cu □, Ni □ Co □ , Cd □ Fe □, Zn □, Na □ , K □ Ca □, Mg □ |  |  |  |  |  |
| 2 |  |  | Cu □, Ni □ Co □ , Cd □ Fe □, Zn □, Na □ , K □ Ca □, Mg □ |  |  |  |  |  |
| 3 |  |  | Cu □, Ni □ Co □ , Cd □ Fe □, Zn □, Na □ , K □ Ca □, Mg □ |  |  |  |  |  |
| 4 |  |  | Cu □, Ni □ Co □ , Cd □ Fe □, Zn □, Na □ , K □ Ca □, Mg □ |  |  |  |  |  |
| 5 |  |  | Cu □, Ni □ Co □ , Cd □ Fe □, Zn □, Na □ , K □ Ca □, Mg □ |  |  |  |  |  |

(Note: The reference / standards will also be considered as a run and should be provided along the samples. One sample submission form will be used for one type of mobile phase. For samples data collection, provide a writeable CD/DVD. For additional samples use extra sample form)

### Any Additional Information / Comments: Date:

**Signature of Supervisor with Stamp: Chairperson:**

(If GCUF Student or Faculty Member)

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*For CHL Internal Use Only:*

Payment Verified: Yes / No Sample Processed: Yes / No Date:

### Comments / Remarks (If any):

**Signature Analyst CHL: Payment Information:**

**Signature Director CHL:**

**Analysis Rates (Rs / Element/Sample):** Academia GCUF: Rs **50/-;** Academia other than GCUF: Rs **100/-;** Industry: Rs **200/-**

**Account #:** 4137669162

**Account Title:** Central Hi-Tech Lab, GCUF **Bank:** National Bank of Pakistan