|  |  |  |
| --- | --- | --- |
| TTEC LA-ICP-MS lab application form | | |
| **Applicant Information** | | |
| Name: | | |
| ID Number: | Email: | |
| Department: | Phone: | |
| Type(s) of samples: | | |
| Description of analysis required: | | |
| Why do you need to use the LA-ICP-MS: | | |
| **PREPARATION** | | |
| Have you made thin sections or pucks: | | |
| Have you checked that your thin sections or pucks fit the sample holder(s): **Y/N** | | |
| Have you acquired high quality images of your samples (*‘Nikon Optical’* quality or equivalent): **Y/N**  If N, why not**‡ :** | | |
| Have you acquired BSE or EDX for your samples: **Y/N** | | |
| If **N**, why not**‡** : | | |
| Is your work routine (i.e. based on previous exps.), or method development: | | |
| Will you work primarily with your supervisor, independently, or with Gary: | | |
| What laser settings, analytes, standards etc. do you intend to use: | | |
|  | | |
| Signature of supervisor: | | Supervisor email and phone number: |
| Signature of applicant: | |  |

**\* You should make pucks or thin sections *before* completing this form.**

**†  If answer to this question is N your application will be rejected until such a time as you can answer affirmatively**

**‡ If justification for lack of imaging is unreasonable you may be asked to take images before working**