



Central Instrumentation Facility (CIF)

Central University of South Bihar

Sh-7, Gaya-Panchanpur Road

Post- Fatehpur, Gaya-824236

REQUEST FORM

Gas Chromatography & Mass Spectrometry (GCMS)

Incompletely filled sections may result in sample rejection!

Contact Details:

Date: _____

Name: _____ Name of Supervisor: _____

Dept./Organization: _____ Signature of Supervisor: _____

Tel. no.: _____ Fax no./email: _____

Billing address: _____

Sample Details:

Retain sample: Yes/No

Acquired data confidential: Yes/No

Sample information for MS:

1. *Sample Code: _____
2. *Molecular Formula: _____
3. *Molecular Weight: _____
4. *Melting point: _____ °C (for solids)

Molecular Structure

5. *Boiling point: _____ °C (for liquids)

6. *Mass range to get measure: _____

7. *Temperature programming in MS or in GC-MS: _____

8. *Method of purification & chemical nature of stationary phase used: _____

9. *Expected chemical nature of molecules in elution, with respect to polarity _____

10. *Specify if any metals / metal ions present **Others**

Please give details: _____

Analysis Requirement:

Ionization Mode: EI Ion(s) of interest: _____

Details of column: _____

Carrier gas: _____ Flow rate: _____

GC conditions: Injector temp.: _____ Splitless: Yes/No

Detector temp.: _____ Split: Yes/No

Split ratio: _____

GC separation program: Please give details: _____