

Powder XRD Measurement Request Form

*Fill the form and send the sample with this form to: Hongshan He, Ph.D., Dunbar 157, Department of Chemistry and Molecular Department, North Dakota State University, Fargo, ND 58105.
Tel: (701) 231-5256, E-mail: hongshan.he@ndsu.edu*

YOUR NAME AND ADDRESS

Name: _____

Date: _____

Address: _____

Phone: _____

E-mail: _____

BILLING CONTACT PERSON

Name: _____

Phone: _____

SERVICE REQUESTED

A: Scan mode and range:

B: Unit cell determination

C: Structural determination and refinement

D: Other (please write below):

DESCRIPTION OF EXPECTED STRUCTURE

A: Sample Name: _____

B: Composition: _____

C: Expected structure (please draw a structure below)