



X-Ray Diffraction/AFM Laboratory

Request Form for XRD Analysis

From Submission Date: _____

Student Faculty Others

Name: _____ Reg. No. _____

Supervisor Name: _____ Institution/Organization: _____

Contact Number: _____ NUST E-mail Address*: _____

Project Title: _____

Nature of Work: Student Research Collaboration Consultancy

Bulk Solid Powder Coating / Thin Film

(In case of bulk materials, thin films, coatings and membranes, please consult with the Lab Engr. before form submission)

Equipment to be Used:	Sample Description		Testing Specifications	
	No. of Samples	Sample Specification		
X-Ray Diffraction			Scan Time (mints)	
			Step Size	
			Analysis Details	
Atomic Force Microscope			Analysis Mode	
			Time	
			Scan Area	
Other Details if any				

Student Signature

Supervisor Sign & Stamp

HoD(Concerned Department)

For official use only:

Analysis Date	Results Sent on	Folder ID

Lab In charge: _____

HoD Materials Engineering _____

Analyst:

Engr. Hamza Ul-Haq