



INSTITUTE OF NANO OPTOELECTRONICS
RESEARCH AND TECHNOLOGY (INOR)
UNIVERSITI SAINS MALAYSIA (USM)

Block A, Ground Floor, SAINS@USM, No.10, Persiaran Bukit Jambul 11900 Bayan Lepas, Penang, Malaysia.
T:+604-653 5637/5638 | F:+604-653 5639

CHARACTERIZATION ANALYSIS REQUEST FORM

Requestor Name : _____
 Contact No. : _____ Email : _____ Date : _____
 School/ Company : _____
 Category : INOR Staff/ Student Other Dept. : _____
 Sample Type : Powder Thin Film No. of Sample : _____
 Materials : _____
 Substrate : _____
 Hazardous : _____
 (e.g: radiation, poison & etc)
 Consultation Required : Yes No

Please Tick Appropriate Box

EQUIPMENT

- Photoluminescence [PL]
Spectrum range: _____ nm to _____ nm
- Electroluminescence [EL]
 I _____ range _____ Fix V= _____ limit
 V _____ range _____ Fix I= _____ limit
- Hall Effect Deking Magnet DX-50
- Probe Station with Micro-Positioner
 CV IV Others
 With Sample Prep Without Sample Prep
 Contact:
 Ohmic
 Schottky
 Metal : _____
 Thickness : _____
 Hall Effect NMI HEMS

Other information about the sample (e.g. sample stability/temperature) :

Requestor Signature:

Supervisor or Approval:

(if Students, need to get the approval from Supervisor)

Remarks:

* Please refer to the analysis/equipment usage charges on INOR website.

** Any incomplete form will not be processed.

*** Quotation will be sent through requestor's email within 3 working days.

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