



High-Resolution NMR Sample Submission Form

Name (please print) _____ Date: _____
Phone Number: 902-585-1515 (Office) Email Address: _____
902-585-1790 (Lab)
Fax Number: _____ Supervisor: Dr Amitabh Jha
Your Sample ID: _____ Supervisor Email: ajha@acadiu.ca

If Submitting a Solution:

Deuterated Solvent? CDCI3 - DMSO-d6
~ Concentration? _____

If Submitting a Solid or Neat Liquid:

Mass? _____ mg
Suggested Solvent? CDCI3 - DMSO-d6

Proposed Structure	Requested Experiments				
	¹ H	¹³ C{ ¹ H}	³¹ P{ ¹ H}	¹³ C DEPT	¹³ C UDEFT
	COSY	HSQC	HMBC	NOESY	TOCSY
	Other Nuclei (²⁹ Si, ¹¹ B, ¹⁹ F, ¹¹⁹ Sn, etc.) _____				
	Other Experiments Requested: _____				

• Do you have a specific spectrometer request? **YES** or **NO**

** If yes then specify here which spectrometer and why.

• Does your sample require special handling precautions? **YES** or **NO**

** If yes please specify on the back necessary precautions & any hazards we may face handling your sample.

• Do you want NMR-3 staff to process your NMR data? **YES** or **NO**

** If yes data will be sent as an attached pdf to the email address(es) specified above. Processing fees will apply.

• Do you want the sample held for pick-up? **YES** or **NO**

** If yes then the sample will be held for a maximum of 2 weeks unless alternative arrangements are made.

Please Specify Your Research Group's Affiliation with the NMR-3 Facility (Check One):

- Dalhousie Academic / Acct # For NMR Fees: _____ Non-Dal Academic @ Supporting Institution
 Government / Industry Non-Dal Academic @ Non-Supporting Institution

Details Concerning Supporting vs Non-Supporting Academic Institutions can be Found Here: http://nmr3.chemistry.dal.ca/docs/NMR3_Supporting_Institutions.pdf

Please Outline Your Research Problem (What Question(s) do you Wish to Answer Using NMR?)

Please Read & Obtain Necessary Signatures:

I understand that charges will be made for magnet time, supplies, processing requests, as well as for preparing samples as outlined on the NMR-3 website: http://nmr3.chemistry.dal.ca/docs/NMR3_Fees.pdf

I agree to acknowledge the source of these spectra as "The Nuclear Magnetic Resonance Research Resource (NMR-3) when they are presented in any form, such as in a thesis, presentation, manuscript, or book.

Signature: _____ Supervisor's Signature: _____

Photocopy of signature not accepted*

Office Use Only:

Date Received: _____ Date Finished: _____ # Spectra Processed: _____ Sample Prep Fee? **Y** OR **N**
Fo Autosampler Service: _____ Holder #: _____ ICON Queue Name: _____