



Transmission Electron Microscope (TEM) User Form

Indian Institute of Science Education Research Mohali

Sector 81, Mohali, SAS Nagar, Punjab 140306

Date: / /

User Name:

Organization/Dept:

User Email:

Mobile No:

1. Name of the sample:

2. All (expected) elements of the sample:

3. Description of the sample/chemical formula:

4. Does it have water?

Yes/ No

5. Is the sample magnetic?

Yes/ No (must avoid magnetic samples)

6. Is the sample toxic?

Yes/ No (must avoid toxic samples)

7. Techniques requested (to be ticked)

TEM

HRTEM

SAED

EDS

STEM-HAADF

8. Describe clearly what is expected in the observation (for each mode):

If help is needed in sample preparation:

9. Is ultrasonication advisable? Yes/no

Duration of ultrasonication: (minutes)

10. Dispersion medium (ethanol, isopropanol, water, any other (specify)?

Lab in Charge:

Signature:

For office use only

Comments:

Sample number:

Signature: