

Equipment: XPS (Thermo VG)

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2		5	
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To be completed by the applicant	
Type of experiments	
Internals ICPEES ☐ Academic project ☐ Industrial project ☐ Other:	Externals ICPEES ☐ Industrials ☐ Academics ☐ Order provided Référence of quotation :
Name, First name :	
☎ :	@ :
Date of application :	Degree of urgency :
Name and signature of the project manager or scientific responsible :	
Elements present in the samples 	
Treatments: 	
Expected results: 	
Recovery of the samples : ☐ YES ☐ NO	

Risk / Health and Safety Precautions (the reference of the risk and toxicological files should be attached if necessary)

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To be completed by the responsible of the apparatus

Date of the request :	Number of samples for analysis :
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Scheduled date of the experiment :	
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Work carried out by :

☐ the responsible of the equipment..... ☐ the applicant after training.....

Comments :

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