**Sample Information for IMAGE**

**Name of the students/staff**:

**Name of the PI**:

**BP number for charge**:

**Date and time of the appointment**:

**Duration of the appointment:**

**Sample information**:

Please provide the following information with your samples:

1. Details about your sample:

Circle or check if you sample is: Solid Liquid

NOTE: If sample is solid, it must be completely dried in an oven at 100 oC overnight. If the sample cannot be kept at 100 oC overnight, please dry the sample at 40-60 oC for an extended period of time (18-24 hours). Wet samples cannot be run in high vacuum, but the wet samples can be run in ESEM. ESEM images may not provide images at high magnifications.

If your sample is/are biological sample(s), please provide a brief description.

2. For biological samples, please circle if it is: virus bacteria fungal other.

Please provide detail if you circle “other”.

Name of the microbes:

3. Is your sample infectious? Yes No

If it is infectious, please provide detail on the sample:

If it is deactivated, please write down how it was deactivated.

3. Number of samples to run: \_\_\_\_\_\_\_\_\_

4. What characterization are you looking for, please circle it:

SEM: Yes No

TEM: Yes No

EDX: Yes No

Backscattering: Yes No

AFM: Yes No

CPD: Yes No

Sputtering: Yes No

Ultramicrotome: Yes No

Confocal microscopy: Yes No

Wide-field optical microscopy (conventional optical microscopy): Yes No

For TEM/AFM samples, please send an email to: imagesiuc@gmail.com

5. Please provide any relevant details that will help us provide you information you are looking for.