

SENSITIVE INSTRUMENT FACILITY (SIF)
Materials Processing Request
 Complete form and e-mail to sif@ameslab.gov

SECTION C. SAMPLE SET
All materials coming to the SIF must comply with DOT transportation regulation

Common sample name	Molecular formula	Approximate size and mass	Number of samples
--------------------	-------------------	---------------------------	-------------------

DESCRIPTOR (choose one)

Thin film	Powder (not nano)	Powder (nano)	Liquid	Crystal	Ingot
-----------	-------------------	---------------	--------	---------	-------

KNOWN HAZARDS (Check all that apply)

None	Nanomaterial	Toxic	Pyrophoric
Flammable	Carcinogenic	Explosive	Dangerous when wet
Radioactive	Biohazard	Oxidizer	Corrosive
Other	Additional Notes		

Is the material being transported in a solvent?	Yes	No
---	-----	----

If yes, specify:

Would you like your sample returned?	Yes	No
--------------------------------------	-----	----

Have any of your samples been irradiated with neutrons or ion beams?	Yes	No
--	-----	----

Are any of your samples radioactive sealed sources?	Yes	No
---	-----	----

Are any of your samples human tissue/materials/cell lines?	Yes	No
--	-----	----

If yes, specify:

Are any of your samples live animals?	Yes	No
---------------------------------------	-----	----

If yes, specify:

Are any of your samples regulated foreign or domestic soil?	Yes	No
---	-----	----

If yes, specify:

Would you like to be present when your materials are processed?	Yes	No
--	------------	-----------

AGREEMENT

The SIF Program Coordinator must be informed immediately of all modifications made and that differ from the original request.

Please allow 1-2 weeks for form processing. A researcher will reach out to you to discuss your request in more detail.

By electronic submission, I certify that the information provided herein is correct to the best of my knowledge.

_____ **FULL NAME**

_____ **DATE**