

Crystal Structure Request Form

User Name:	Faculty Advisor:
Telephone:	Account # :
E-mail:	Date Submitted:
Sample Label:	
Chemical Formula:	
Are the crystals air, moisture, sensitive, etc?	
Solvents used in reaction, crystallization:	
Is the sample chiral and a single enantiomer?	
Is there any specific information needed (nonbonded distances, dihedral angles, ...)?	
Please check service requested: <input type="checkbox"/> Cell parameter determination <input type="checkbox"/> Data collection <input type="checkbox"/> Complete structure determination	
Structure and Atom Labeling Scheme:	
<p>Additional charges will be applied if atoms must be relabeled. On the back of this form describe all reactants and solvents for all reactions.</p>	
Special hazards and precautions for sample or solvent:	