



<p>Request date: Organism: Full name: E-mail: Phone number: Supervisor name: Billing address (please specify the contract name):</p>	<p>Supervisor Signature:</p>
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CONTEXT OF THE STUDY:

DETAILED NATURE OF SAMPLES *: number, atomic composition, synthesis method, dimensions (length, width, thickness):

ANALYSIS REQUESTED:

XPS – Information required *:



Analyse de surface

TOF-SIMS - Information required *:

LEIS - Information required *:

Catalysis chamber treatment:

Stage	Samples	Temperature	Temperature ramp	Gas	Flow (≤ 50 sccm)	Temperature plateau

Unless otherwise specified, the gas will be introduced during the entire heat treatment (ramps + plateau).

BIBLIOGRAPHIC REFERENCES *: