X-Ray Crystal Structure Request Form

Name _____ Date _____
Advisor _____ Adv's Approval _____
Room _____ Phone # _____ Sample ID _____

Structure determination to be preformed by:
_____ User _____
_____ Dr. Eichhorn

Expected Molecular Formula _____
Solvents Used for Crystallization _____
Solvents Used in Synthesis _____

Known Properties ____ Air Sensitive ____ Water Sensitive ____ Light Sensitive
____ Solvent Loss Sensitive
____ Other (Describe) _____

Predicted Structure
Actual Structure

Operator's Use Only
Operators Name _____
Structure ID _____
Cell Parameters:
a _____ α _____
b _____ β _____
c _____ γ _____
Crystal Dimensions _____
Space Group _____
Date Mounted _____
Date Collection Completed _____
Date Structure Completed _____
Temperature _____
Number of Data _____
Data >4σ _____ >3σ _____ >2σ _____
Number of Parameters _____
Types of Absorption Correction: _____
_____
Min/Max Transmission _____
% Decay _____
R _____ R_W _____
R(all) _____ R_W(all) _____
g.o.f. _____
Min/Max Peak on Final Map _____
Comments: _____
_____
_____