

UNIVERSITY SCIENCE INSTRUMENTATION CENTRE-CENTRAL
 INSTRUMENTATION FACILITY (USIC-CIF)
 UNIVERSITY OF DELHI, NORTH CAMPUS, DELHI - 110 007
 REQUEST FORM FOR NMR FACILITY

- | | | | |
|---|-------------|---------|------|
| 1. Sample detail: | Sample code | Solvent | Type |
| 2. User name: | 1. | | |
| 3. Supervisor: | 2. | | |
| 4. Department: CHEMISTRY | 3. | | |
| 5. E-mail (optional): | | | |
| 6. Amount/concentration (1.2mM ¹³ C NMR): | | | |
| 7. No of scans: 16 | | | |
| 8. Nucleus to be studied: ¹ H/ ¹³ C/Other Nucleus (¹⁵ N- ³¹ P) | | | |
| 9. PPM range (0-12PPM for ¹ H NMR and 0-200 PPM for ¹³ C NMR): | | | |
| 10. Reference compound (if any): | | | |
| 11. Type of experiments (1D/2D). | | | |
| 12. Desired Experiments | | | |

1D	2D	2D	2D
VT>RT	DEPT	COSY	HMBC
VT>RT	NOE	ROESY	HETCOR
Reaction kinetic Measurements	T, Measurements	HMQC	NOESY
INEPT	Any other	HSQC	C,C-ADEQUATE

Approximate time required: (a) Operator time: _____ (b) Spectrometer time: _____

Nature of sample (toxic, unstable, explosive, air and moisture sensitive): _____

Special request (if any): _____ Signature of the student

Date: _____ (Signature of the Supervisor With seal)

Acknowledgement: Please make sure that you acknowledge the NMR service in your Publication as "Thanks to USIC-CIF, University of Delhi, Delhi, India for NMR Data".