

# REQUEST FORM FOR THE USE OF MAGNETRON SPUTTERING SYSTEM

Request #: \_\_\_\_\_ (for office use only)

Date: \_\_\_\_\_

Researcher's Name (Capital Letters):	
Supervisor's Name (Capital Letters):	
Department:	
Number of Samples:	

Description of job (please provide details):

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Estimated required thickness of thin film: \_\_\_\_\_ Targets required: \_\_\_\_\_

Gases required: \_\_\_\_\_ Substrates required: \_\_\_\_\_ Substrate temperature: \_\_\_\_\_

(f) Other consumables/Non consumables:

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## RULES

1. As a general principle, the physics lab provides support to various Departments of the SSE and other universities of Pakistan as a matter of courtesy contribution to SSE's research vision.
2. The requester is responsible to reimburse all associated costs.
3. The user of the facility is responsible for cleanup after use.
4. The user(s) have to follow the safety and work procedures during the work.
5. Untrained, unskilled and novice user cannot work in the lab unsupervised.
6. The sputtering system is not meant to be used for student activities, competitions and unsupervised projects even if they are part of coursework.
7. Extensive work will be entitled to being charged. Details will be discussed on a case by case basis.
8. Faculty led research has precedence over other jobs.
9. **The facility can be used only if this form is filled and agreed upon.**

# DECLARATION

I have filled the form and read the rules of using "Magnetron Sputtering System" carefully. I hereby solemnly declare that I have understood the rules and should follow them during practice. I further declare that I shall strictly follow the safety procedures during my work.

Researcher's Name: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

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## For office use only

Accepted

Rejected

Incharge: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_