

500 MHz NMR Service Request Form

Name _____

Phone #: _____

Email _____

Date _____

Supervisor/PI/TTU Dept _____

Sample ID Name _____

Draw Probable Structure

Solvent _____

Weight of Sample (mg) _____

Experiments:

___ Standard ^1H

___ Standard ^{13}C

___ ^{13}C DEPT (edited or "135")

___ 2D COSY

___ 2D NOESY or ROESY

___ 2D ^1H - ^{13}C HSQC or HMQC

___ 2D ^1H - ^{15}N HSQC

___ 1D NOE Peaks to irradiate (ppm): _____

___ Variable temperature (specify): _____

___ Other (specify): _____

Data format:

___ Standard printout of ^1H spectrum: integration regions: _____

___ FID sent to email address

___ Spectrum PDF sent to email address

Comments: