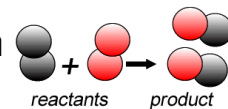




The  
University  
Of  
Sheffield.

# High Pressure / Temperature Reactions Sample Submission Form



## User Information

Name: ..... Department: .....  
 Group: ..... Lab: .....  
 Email: ..... Office Phone: .....  
 Charge Code:..... Date: .....

## Reaction Information

Reaction overview: .....

.....

Gas: ..... Pressure: .....  
 Temperature: ..... Reaction time .....

Total volume .....

(min 40mL - max 1200mL for autoclave reactors

If less than 40mL please contact Rob Hanson to discuss before sample submission):

Special Instructions / precautions: .....

.....

Reactants and Products

CoSHH Hazards

.....	.....
.....	.....
.....	.....
.....	.....
.....	.....

Work will not be started if the CoSHH information and / or the relevant MSDS has not been submitted.

Results cannot be guaranteed. Every effort will be made to carry out the reaction as requested. Where conditions cannot be met you will be contacted and an alternative procedure agreed.

Service use only :

Total time

Reactor  
Comments