**SOLICITUD DE RECEPCIÓN DE MUESTRA**

**LABORATORIO ICP-MS**

**INSTITUTO DE GEOFÍSICA, UNAM.**

Fecha de recepción: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nombre del solicitante: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel. oficina:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ celular:\_\_\_\_\_\_\_\_\_\_\_\_e-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nombre del responsable del proyecto:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nombre del proyecto: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Acuerdo de pago: efectivo  en especie  otro \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Señale los elementos de su interés:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **H** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | **He** |
| **Li** | **Be** |  |  |  |  |  |  |  |  |  |  | **B** | **C** | **N** | **O** | **F** | **Ne** |
| **Na** | **Mg** |  |  |  |  |  |  |  |  |  |  | **Al** | **Si** | **P** | **S** | **Cl** | **Ar** |
| **K** | **Ca** | **Sc** | **Ti** | **V** | **Cr** | **Mn** | **Fe** | **Co** | **Ni** | **Cu** | **Zn** | **Ga** | **Ge** | **As** | **Se** | **Br** | **Kr** |
| **Rb** | **Sr** | **Y** | **Zr** | **Nb** | **Mo** | **Tc** | **Ru** | **Rh** | **Pd** | **Ag** | **Cd** | **In** | **Sn** | **Sb** | **Te** | **I** | **Xe** |
| **Cs** | **Ba** |  | **Hf** | **Ta** | **W** | **Re** | **Os** | **Ir** | **Pt** | **Au** | **Hg** | **Tl** | **Pb** | **Bi** | **Po** | **At** | **Rn** |
| **Fr** | **Ra** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  | **La** | **Ce** | **Pr** | **Nd** | **Pm** | **Sm** | **Eu** | **Gd** | **Tb** | **Dy** | **Ho** | **Er** | **Tm** | **Yb** | **Lu** |
|  |  |  | **Ac** | **Th** | **Pa** | **U** | **Np** | **Pu** | **Am** | **Cm** | **Bk** | **Cf** | **Es** | **Fm** | **Md** | **No** | **Lw** |

**Registro de muestras:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No.** | **Clave de muestra** | **Breve descripción de  muestra** | **No.** | **Clave de muestra** | **Breve descripción de  muestra** |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |
| **4** |  |  |  |  |  |
| **5** |  |  |  |  |  |
| **6** |  |  |  |  |  |
| **7** |  |  |  |  |  |
| **8** |  |  |  |  |  |
| **9** |  |  |  |  |  |
| **10** |  |  |  |  |  |

Condiciones de recepción de muestra (filtrada 0.45 micras, molida y tamizada malla 200)\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_