

SAMPLE SUBMISSION FORM

Core Facility for Ecological Analyses



Submit samples to:	Facility Manager Contact Information
Core Facility for Ecological Analyses Life Science II, Room 417 Mailcode 6509 Southern Illinois University Carbondale, IL 62901-6509	Amanda Rothert Phone: 618-453-3218 Fax: 618-453-3441 email: mandy118@siu.edu

All samples submitted to the facility must be accompanied by a sample submission form.

Following analyses, data will be submitted to the investigator via email unless requested otherwise. Please pick up samples after analysis complete.

INVESTIGATOR INFORMATION (*Required)

Name: *First _____ *Last _____

*Phone No. _____ *E-mail _____

*Advisor _____ *FAS/AIS Acct No _____

*Fiscal Officer _____ Account Title _____

*Department _____ *Campus Location/Mailing _____

SAMPLE INFORMATION

*Sample identification system (*Example* Investigator/project name, Treatment, Sampling date)

*No. of Samples _____ in No. of Boxes _____ *Sample matrix _____

* Additional notes: _____

*Storage specifications _____

ANALYTES REQUESTED (Indicate number of samples for which of the following)

Flow Solution IV (for liquids)

_____Ammonium-N ($\text{NH}_4\text{-N}$)

_____Nitrite-N + Nitrate-N ($\text{NO}_2\text{-N} + \text{NO}_3\text{-N}$)

_____Nitrite-N only ($\text{NO}_2\text{-N}$)

Flash EA 2000 CHNS/O Elemental Analyzer (for solids)

_____Total Carbon & Nitrogen (CN)

_____Total Organic Carbon (TOC)

Total Organic Carbon/Total Nitrogen Analyzer (for liquids)

_____Total Carbon (TC)

_____Total Organic Carbon (TOC)

_____Total Nitrogen (TN)

Date Received _____ Date Completed _____

Analyzed by _____

File Name(s): _____