



Center for Quantitative Imaging (CQI) Sample Submission Request Form

Please complete this Client Submission Request Form. Save file with your name, (ex: JohnDoe_CQI_Sample Request Form_Date of Form Submission). Email the completed form to CQI at odette.mina@psu.edu.

Date Submitted to CQI:

Client Information

Penn State faculty, staff, and students, please fill out the “Penn State Internal” information. All others, please fill out the “Non-Penn State External.”

Penn State Internal

Non-Penn State External

Contact Name:

Organization Name:

Email:

Contact Name:

Department:

Contact Email:

Advisor Name:

Contact Phone Number:

Email:

Note: If you do not an active Academic Research Services Order (ARSO), please contact Odette Mina (odette.mina@psu.edu).

Do you have a registered account in LEO, (Laboratory Equipment Operations)?

No Yes

If yes, please provide account name and IO#.

If no, go to leocores.psu.edu to register.

If applicable, samples can be shipped to:

Penn State University
 416 Academic Activities Building 129 Scholarship Dr.
 University Park, PA. 16802
 ATTN: Andrew Ross



Sample Information

Date sample(s) will be available for drop-off at CQI (please work with CQI staff to schedule drop off):

Desired date of data delivery (Please note: Data will be available for download for 60 days after delivery of data).

Please provide a brief project name to aid in communications about this project:

Number of samples:

Material Composition of Sample(s):

Describe your region of interest (i.e. entire sample, gauge region, head, etc.):

Size of the features you are trying to visualize/measure (include units: mm, um, or nm):

Desired Scan Resolution (include units: mm, um, or nm):

Does this project require additional dimensional calibration beyond what the center does routinely? If so, please discuss with CQI staff. (Note: additional calibration measure may add ~1 hour to daily scans.)



Is post processing required for this project, please be specific:

Do samples need to be returned?

No Yes

Desired data format (check all that apply):

.vol 8-bit tiff 16-bit tiff .32-bit tiff stl .xrm (Vesa only) other

May we use pictures of your samples and/or scans for educational purposes including information and training materials?

No Yes

Sample Information

List any hazardous materials associated with your sample (e.g. gases, explosives, >301lbs, sharp edges, flammables, ect).

If so, what special handling requirements are necessary? (e.g. gloves, respirator, secondary containment, etc.)
Please include a link to relevant Safety Data Sheets (SDS).

If your sample is animal or human related, please list the associated ORP or other institutional protocol number.



Sample Mounting

If necessary, may we use adhesives to mount your sample? (e.g. painters tape, double sided tape, hot glue, sticky tac, etc.)

Do you need to know the orientation of your sample with the respect to the scan data?

No Yes

Will sample include a physical mark, (e.g. indent, notch)?

No Yes

If yes, please provide details of sample marking.

If no, will CQI staff need to mark it?

No Yes

If yes, please provide details.

For CQI use only

Date of sample submissions to CQI:

Date of CT scan completion:

Date of data upload/delivery:

Project complete:

Date of sample pickup:

Notes: