

# X-ray Data Collection Request Form

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Research Group: \_\_\_\_\_ Phone/email: \_\_\_\_\_

**Draw a picture of the compound that you believe to be your crystal.** If you are unsure of the identity of your compound, make your best guess.

**Show the reaction by which the compound was prepared.** Please indicate all reagents and solvents used because these sometimes have a way of appearing unexpectedly in crystals that are grown from a reaction mixture:

**Has the compound been characterized before by X-ray crystallography?** Yes  No

If yes, please indicate CSD number or unit cell: \_\_\_\_\_

**Specify how the crystal was grown:**

Layered diffusion  Vapor diffusion   
Indicate solvent(s) used: \_\_\_\_\_ Indicate solvent(s) used: \_\_\_\_\_

Slow cooling of solution  Evaporation   
Indicate solvent(s) used: \_\_\_\_\_ Indicate solvent(s) used: \_\_\_\_\_

Other

**Please indicate any special precautions regarding your compound:**

O<sub>2</sub> sensitive  Moisture sensitive  Light sensitive  Thermally sensitive

**Please indicate any other potentially useful information, e.g., possible unit cells to look for:**

**Location of sample:** Attached:  Please call for when ready:

**Action taken:** Crystal do not diffract/diffract poorly:  Data set collected:   
Unit cell only determined:  Data set number: \_\_\_\_\_