

National Institute of Immunology  
Central Mass Spectrometry Facility (CMSF)  
Mass Spectrometry Experiment Requisition Form  
ORBITRAP EXPLORIS 240 MASS SPECTROMETER  
Email: [cmsf@nii.ac.in](mailto:cmsf@nii.ac.in)

Section # 1: Information on user and project:

1. Name of the Institute / Student / Researcher / Fellow:
2. Name of the Laboratory:
3. Name of the PI / Scientist:
4. Phone No.:                      Mobile:                      Email:

Section # 2: Safety information (please state explicitly if the sources of the sample is hazardous):

5. Is the sample contagious? Yes / No
6. What is the BSL level of sample prior to digestion? BSL1 / BSL2 / BSL3
7. Origin of the sample: Mice / Human / Virus / Bacteria / Parasite / Others

Section # 3: Sample Information:

8. Total number of samples:
9. Code No./Sample Names:
10. Description of sample: Please delete those parameters that are not applicable.
  - A. Sample quantity information:
    - a. Concentration of the sample:
    - b. Quantity of the sample:
    - c. Nature of the sample: Solid / liquid / lyophilized.
    - d. Sample storage conditions / stability
    - e. Database to be used for processing:
    - f. Labelled / Unlabeled (Specify)

Section # 4: Simple samples for UHPLC:

- a. Single protein – known or unknown
- b. Single peptide – known or unknown
- c. Electrophoresis gel bands
- d. Enzymatically digested: Yes / No
- e. Enzyme(s) used:
- f. Samples desalted:                      Yes / No

Note: The quality of the output data is directly proportional to the quality of the samples and their preparation and are entirely the responsibility of the user.

Signature

(Student / Researcher / Fellow)

Signature

PI / Scientist

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To be filled in by CMSF personnel:

CMSF Study No.

Date Received: