



XAS Project Proposal Form Attachment

Center for Advanced Microstructures and Devices, Louisiana State University, 6980 Jefferson Hwy., Baton Rouge, LA 70806
(please type or print)

1. **Project Title:** _____
Anticipated Completion Date: _____

2. **Absorption Edge(s):**

Edge _____	Energy (eV) _____	<input type="checkbox"/> EXAFS	<input type="checkbox"/> XANES test
Edge _____	Energy (eV) _____	<input type="checkbox"/> EXAFS	<input type="checkbox"/> XANES
Edge _____	Energy (eV) _____	<input type="checkbox"/> EXAFS	<input type="checkbox"/> XANES
Edge _____	Energy (eV) _____	<input type="checkbox"/> EXAFS	<input type="checkbox"/> XANES

3. **Method of Data Collection:** Transmission Electron Yield Fluorescence

4. **Describe the Sample(s)?**

Number: _____
Form: _____
Amount: _____
Concentration (for each element to be measured): _____
Special handling requirements (e.g. air sensitive): _____

5. **Standard/Reference Compounds** (must be provided for each absorption edge):

6. **Names of Project Participants to Collect Data:**

NOTE: Experiments will involve 24 hr./day data collection.
NOTE: All participants must undergo safety training.

7. **CAMD Contact:** Has the feasibility of this project been discussed with a CAMD scientist(s)? ____ Yes ____ No
If yes, who? _____