

Apply for NMR time:

Terms and conditions:

Contact info:

User First Name:
User Last Name:
Email address:
Full address:
Phone number:
Fax number:
Principal Investigator:

Project info:

Sample info:

Sample name :
Molecular weight:
Sample concentration:
Solvent composition:
Salt concentration:

Experiment info:

Instrument needed: 600 MHz or 800 MHz
Amount of time requested:
Experiment(s) requested:
Temperature needed: