## **XRD-MEASUREMENTS**

LEGEND:	white: please fill in	light gray: optional		dark gray: don't fill in		
Full Name:		Phone:	E-mail:	@fhi.mpg.de	Date:	
SAMPLES						
Hazards:	0 (1) 0 (		O		O 🕸	
Sample number from database	Chemical compo		ons potentially presei		oject filiation:	
1)						
2)						
3)						
4)						
6)						
7)						
8)						
9)						
10)						
MEASUREMENT CONDITIONS						
Measurement types:						
O Routine XRD (Transmission on STOE "Rietveld")						
O Advanced XRD (Reflection on Bruker D8 "Franklin")						
O XRR (Reflectometry on Bruker D8 "Wyckoff")						
Remarks:						
Priority (reasons) / Deadline:						
OPERATOR REMARKS						
Measuring time:		Diffractometer (R/F/W):				
Operator:	Date:		Path:			
Remarks:						