

Water Quality Laboratory
Virginia Tech Department of Biological Systems Engineering
106 and 107A Seitz Hall, Blacksburg, Virginia 24061

Request for Analysis

Name: _____
Phone: _____
Email: _____

P.I./Advisor _____
Department: _____
Address: _____
Phone: _____

Project Name: _____
Fund Number: _____
Sample Submission Date: _____
Desired Completion Date: _____

Analysis Questions
 Kelly Peeler, Laboratory Manager
 kapeeler@vt.edu, (540) 231-4334

# of Samples	Analysis	Matrix	Sample Preparation	Expected Conc. Range	Analyst* (Self or WQL)

Matrix: DW - drinking, SF - surface fresh (lake, stream, river), GR - ground, SA - saline (estuary, ocean), O - other
Sample Preparation: A - acidified (pH?), FT - filtered (pore size?), R - refrigerated, FR - frozen, O - other (explain)
Expected Concentration Range: Please list if known

Project description, other helpful sample information, and/or all other comments:

*If requesting analysis performed by self:

A) List completed safety training (when and what type), and briefly list experience working in any laboratory:

B) Indicate when available to work:

Requestor signature:

**Please attach/include list of sample ID's
 when you submit your samples.**

Lab Manager Notes:

Lab manager signature:

Date: