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| APPENDIX NSupplement to CNMS Research Proposalfor access to neutron scattering facilities at theSpallation Neutron Source or High Flux Isotope Reactor | ORNL USE ONLYCNMS Proposal Number:      |
| IPTS Proposal Number:      |

*This appendix must accompany a CNMS proposal for any project that requests access to ORNL’s neutron scattering facilities. The CNMS does not accept proposals that request only neutron scattering. Such proposals must be submitted through the IPTS system.*

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| **Title of CNMS Proposal (copied from first page of proposal)**:      | **Principal Investigator**:      |
| FACILITY AND INSTRUMENT- Choose facility and up to 2 instrument(s). Details at <http://neutrons.ornl.gov/instruments/>.[ ]  Spallation Neutron Source- choose instrument below. [ ]  BL-1A:USANS   [ ]  BL-1B:NOMAD [ ]  BL-2:BASIS [ ]  BL-3:SNAP [ ]  BL-4A:MAGREF [ ]  BL-4B:LIQREF [ ]  BL-6:EQ-SANS [ ]  BL-7:VULCAN [ ]  BL-11A:POWGEN [ ]  BL-16B:VISION [ ]  High Flux Isotope Reactor- choose instrument below. [ ]  HB-1A:FIE-TAX [ ]  HB-2A:POWDER [ ]  HB-2B:NRSF2 [ ]  HB-2C:WAND2  [ ]  HB-3A:SINGLE CRYSTAL [ ]  CG-1D:IMAGING [ ]  CG-2:GP-SANS [ ]  CG-3:BIO-SANS  |
| **SCIENTIFIC JUSTIFICATION for requesting neutron time.** Identify the specific scientific question(s) that neutron time will address and describe the techniques that will be used to generate and analyze the data.      |
| **Number of days requested for neutron scattering:**      **List dates that you will not be available for beamtime:**       |
| **Did you contact a neutron facility staff member to discuss the feasibility of your project? [ ]  Yes** **[ ]  No If so, Contact Name(s):** **Provide IPTS proposal numbers for any related neutron user proposals:****Is the proposed research required for a student’s thesis? [ ]  Yes [ ]  No** |
| **GENERAL ENVIRONMENTAL, SAFETY AND HEALTH CONSIDERATIONS****Will these experiments involve potential exposure to biological materials? [ ]  Yes [ ]  No** **Will these experiments involve human subjects or laboratory animals? [ ]  Yes [ ]  No** **Will these experiments involve engineered nanoscale particles? [ ]  Yes [ ]  No** **Will these experiments involve hazardous substances or equipment? [ ]  Yes [ ]  No**  |

*NOTE: Please fill in only as much information on this page as you know at this time.*

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| SAMPLE ENVIRONMENT- Please specify the sample conditions during neutron scattering measurements.Temperature range: Minimum       Kelvin; Maximum       Kelvin Magnetic Field:       TeslaPressure: [ ]  Ambient [ ]  Anvil Cell [ ]  Gas CellOther (for example, gas species):      Describe in sufficient detail what you intend to do, including sample cells, holders, gas exchanges, other information.     Describe any equipment that you intend to bring.     Home facility’s technical contact for this equipment (name, email, phone):      |
| SAMPLES- Provide information requested below for each neutron scattering sample. Attach additional sheets if necessary.  |
| FIRST SAMPLE: Sample Name       Molecular Formula      Sample Description      Sample Hazards (check all that apply)[ ]  None [ ]  Radioactive [ ]  Biohazard [ ]  Explosive [ ]  Cryogenic[ ]  Flammable [ ]  Carcinogenic [ ]  Toxic [ ]  Electrical [ ]  High Pressure[ ]  Corrosive [ ]  Engineered Nanomaterials [ ]  Other (specify) Form: [ ]  Gas [ ]  Liquid [ ]  Nanomaterials [ ]  Polymer [ ]  Polycrystal [ ]  Powder [ ]  Single Crystal [ ]  Soil [ ]  Thin Film [ ]  Other (specify) Dimensions: Height       cm; Width       cm; Length       cmNumber of samples required:      Mass:       grams Density:       g/cm3 |
| SECOND SAMPLE: Sample Name       Molecular Formula      Sample Description      Sample Hazards (check all that apply)[ ]  None [ ]  Radioactive [ ]  Biohazard [ ]  Explosive [ ]  Cryogenic[ ]  Flammable [ ]  Carcinogenic [ ]  Toxic [ ]  Electrical [ ]  High Pressure[ ]  Corrosive [ ]  Engineered Nanomaterials [ ]  Other (specify) Form: [ ]  Gas [ ]  Liquid [ ]  Nanomaterials [ ]  Polymer [ ]  Polycrystal [ ]  Powder [ ]  Single Crystal [ ]  Soil [ ]  Thin Film [ ]  Other (specify) Dimensions: Height       cm; Width       cm; Length       cmNumber of samples required:      Mass:       grams Density:       g/cm3 |
| THIRD SAMPLE: Sample Name       Molecular Formula      Sample Description      Sample Hazards (check all that apply)[ ]  None [ ]  Radioactive [ ]  Biohazard [ ]  Explosive [ ]  Cryogenic[ ]  Flammable [ ]  Carcinogenic [ ]  Toxic [ ]  Electrical [ ]  High Pressure[ ]  Corrosive [ ]  Engineered Nanomaterials [ ]  Other (specify) Form: [ ]  Gas [ ]  Liquid [ ]  Nanomaterials [ ]  Polymer [ ]  Polycrystal [ ]  Powder [ ]  Single Crystal [ ]  Soil [ ]  Thin Film [ ]  Other (specify) Dimensions: Height       cm; Width       cm; Length       cmNumber of samples required:      Mass:       grams Density:       g/cm3 |