

Nanyang Technological University
School of Electrical & Electronic Engineering

Nanyang NanoFabrication Centre (N2FC)

Block S1, Level B5, Rm. S1-B5a-01, Nanyang Avenue, Singapore 639798
 Tel : (65) 6790-6902/03(N2FC CR1), 6790 6541 (N2FC CR2)

Email : n2fc@ntu.edu.sg

Mask Making Specification Form Internal User Submission (For NTU user only)	IUS-No.

1. General Information

Requester Name:		School/Division :	
Employee ID /Student No:		Laboratory :	
		Email:	
Project Supervisor (If requester is student)		School/Division :	
Name :		Work Approved by Project Supervisor	
Email:		Signature :	
Job Submission (Note: Lead-time/mask is 2-3 weeks on receiving completed charge form)			
	Submitted by:	Received by N2FC staff:	
Name in Full			
Signature			
Date			

2. Photo-Mask making information (Please tick or fill in accordingly in the followings.)

Device Title:			
Type of order (please tick one)	New order	Repeated Order	
Data File name:			
Data Format: (please tick one)	GDS	CIF	other, please specify
Type of Mask (please tick one)	1X	1X Master	5X
Number of Layers:			
Minimum Feature of Design* :	Dimension (µm)	@ Layer No./Name	

* N2FC guarantee the minimum dimension and tolerance of 2.0 +/- 0.3µm. Any feature smaller than this value may not be printed correctly. Please contact N2FC if you want to have better results.

3. Data Information (Please tick or fill in accordingly in the followings)

Layout datafile is for :		Select one
- Complete array of mask data		
- Single die (for Array Stepping Arrangement, refer to Item 7)		
Please indicate the window coordinates in your layout datafile which includes your design (Note : N²FC will ignore any data outside the rectangular coordinates)		
Window Coordinates	Lower-Left (LL) corner	Upper-Right (UR) corner
(X, Y)		

4. Mask Substrate Information (Please select the type of mask substrate for your job)

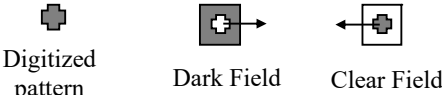
S/N	Type of Substrate	Please select one
1	7"x 7" x 0.12" Soda Lime Glass Mask, flatness <15μm	
2	5" x 5" x 0.09" Soda Lime Glass Mask, flatness <10μm	
3	4" x 4" x 0.09" Soda Lime Glass Mask, flatness <10μm	
4	User provided substrate	

5. Layer Information and Mask Making Instruction

Layer name	Mask Title/Label @ (user supplied)	GDS No.	Field Polarity #		Dimension (μm) *		Pattern Appearance #	
			Dark	Clear	Design	Tolerance	Normal	Mirror

please tick one (user submitted digitized pattern is Normal Appearance)
 @ please refer to Item 10 for charge rate to include user Mask Title/Label at bottom of mask.

Field Polarity:
 Dark : Chrome surface



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 Please include clear indication (on separate sheet if necessary) on the exact location for mask dimension measurement.