MRC Personnel Use Only

Order ID: \_\_\_\_\_\_\_\_\_\_

Number of Nano Chips: \_\_\_\_\_\_\_\_

Number Pico Chips:\_\_\_\_\_\_\_\_

Number Small RNA Chips:\_\_\_\_\_\_\_\_

Number DNA High Sensitivity:\_\_\_\_\_\_\_\_

Number DNA 1000:\_\_\_\_\_\_\_\_

Number DNA 7500:\_\_\_\_\_\_\_\_

Number DNA 12000:\_\_\_\_\_\_\_\_

Molecular Resource Center

19 S. Manassas St., Room 379

Memphis, TN 38163

Phone: 901-448-6191

Fax: 901-448-3500

Contact: Felicia Waller

Email: fwaller@uthsc.edu

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Completion Date: \_\_\_\_/\_\_\_\_ /­­\_\_\_\_ Completed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Agilent Request Form**

|  |  |
| --- | --- |
| Date Request Submitted: | Principal Investigator: |
| Contact Person: | Department: |
| Contact Phone: | Account No.: |
| Contact Email: |  |
| Type of Chip: | Authorized Signature: |

**\* Label tube with principal investigator’s initials and tube number (example: BW #1)**

**All samples must be dissolved in nucleas****e free water and be at appropriate concentration. Samples that fail QC will only be run with investigator’s written permission, and the investigator will be billed for all work associated with samples that fail QC.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **\* Sample ID** |  | **Approximate Concentration** |  | **Solvent (Sample Buffer)** |
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