

Gene Manipulation and Genome Editing Core Facility Service Request

Step 1 All required fields of this form need to be completed before return electronically

Step 2 Understand that all quoted service fees are good faith estimates for requested services. The final cost will be determined upon completion of service.

Step 3 Email form to transgenicmouse@childrens.harvard.edu and Mantu.Bhaumik@childrens.harvard.edu

Gene Targeting Service

Choose type of ES cell line:	Gene Targeted	Wild type
	Imported ES cell	From BCH or IDDRC Core
Pathogen Tested?	Yes No	Results? Positive Negative
ES cell line strain background: :	129 B6 FVB	129/B6 Other:
Targeting construct from strain background:	129 B6 FVB	129/B6 Other:
Construct tried in targeting experiment?	Yes No	Targeting efficiency:
ES cell line Karyotyped?	Yes No	Passage Number: P-
Name of ES cell line:		
Number of clones to be picked after? 96 well format:		
ES DNA preparation?	Yes No	
Name of Gene:		
Name of Targeting Construct:		
Size of targeting vector?		
Positive selection	Neomycine (G418)	Hygromycine Puromycine
Negative selection	TK (GANC)	DT-A None
Targeting event confirmation:	PCR	Southern - 3' Probe Southern - 5' Probe

Approvals

IACUC Protocol #	Date approved
IBC approval #	Date approved

Review - Part 1

All quoted service fees are good faith estimates for requested services. Final cost will be determined upon completion of service

PI Signature

Principal Investigator Information

Affiliation	IDDRC	BCH	HMS	Other
Name				Dept.
Phone				Email

Requestor Information

Name				Dept.
Phone				Email
Emergency Phone Number				Secondary

Billing Information

All quoted service fees are good faith estimates for requested services. Final cost will be determined upon completion of service.

Manager Name	Notes
Manager Email	
Manager Phone #	

BCH or affiliate cost center # is available	Cost center #
Grant #	Expiration date

Cost center is not available	Purchase Order (PO#)
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Service agreement for Gene Targeting

1. The investigator must provide ES cells that are tested negative for mouse pathogen and karyotyped to demonstrate a normal chromosome number.
2. If ES cell lines are imported other than the ones typically used at the Core – then investigators are responsible for additional cost of reagents to complete their projects.
3. The Core does not guarantee successful targeting event, however every effort will be made to generate recombined ES clones.
4. All Embryonic Stem cell related experiments must be in compliance with National Academy of Sciences guidelines for Embryonic Stem Cell Research.
5. It is agreed that any publications arising from the generation of mice by the BCH/IDDRC Gene Manipulation Core will have appropriate acknowledgment of this service.

Name of target gene:

Ref No. [Generate Ref No.](#)

Notes:

Signature of the Principal Investigator (PI)

Signature of PI Authorized Investigator

[Reset](#)

[Click to check required items before emailing](#)

[Send completed PDF to transgenicmouse@childrens.harvard.edu](mailto:transgenicmouse@childrens.harvard.edu) and Mantu.Bhaumik@childrens.harvard.edu