

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

Embryo/Sperm/Cell line Storage Service

Service: Embryo straw storage Sperm straw storage

Choose type: Gene Targeted ES cell line
 Imported ES cell line/s
 ES cell line from BCH/IDDRC Core
 Wild type
 Other:

Frozen By : Date Frozen:

Embryos Frozen as: 2 cell 4 cell 8 cell

Storage Condition: Liquid Phase- Vapor Phase-

Name of Gene:

Number of Frozen Embryos:

Number of Straws:

Number of storage years:

Facility & room:

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

