

Core Unit BIC - Project Intake Form

Please send this form to cubic@uni-muenster.de

Customer Information

Contact name: _____ Department / Working group: _____
E-Mail address: _____ Kostenstelle: _____
Phone: _____ Quote #: _____

Project Information

Brief project description (please include hypothesis and research question)

Technologies (Select one or more of interest)

Single-cell / single nuclei multi-omics

☐ sn/scRNA-seq (3'/5') ☐ scATAC-seq ☐ CITE-seq & cell hashing
☐ scVDJ (+scRNA-seq) ☐ Multiome (RNA + ATAC)

Spatial transcriptomics

☐ Visium HD ☐ Xenium

Spatial Proteomics

☐ MACSima ☐ VS200-Evident

Sample information

Cohort/Sample size: _____
Tissue type (brain, skin, etc.): _____
Species: ☐ Human ☐ Mouse Others: _____
Sample preparation: ☐ Fresh ☐ Frozen ☐ Fixed ☐ FFPE
Expected cell count /sample: ☐ > mio ☐ > 100k ☐ > 10k ☐ < 10k

Additional information

Expected timeline for data generation: _____

Customer comments and remarks:

Bioinformatics

Our service includes NGS QC and basic analysis (e.g., cell segmentation and quantification), but advanced bioinformatics is limited to specific projects, upon discussion with the BIC board.

To be filled by BIC-IZKF staff

Sample received by: _____ Date: _____