

Sample Intake Form

Projects with quote

This form needs to be **provided** as hardcopy **for sample drop off!**

Quote-No.:		Phone:	
Contact name and group			
E-Mail adress			
Billing adress		Cost center / accounts/ BD Fonds Number:	

No. of samples:		
Material:	RNA DNA Tissue/Blood Library	Please specify: Please provide Indexinformation in sample table! Sort of Library: Sequencing mode:

To process your samples it is **necessary** to fill out the **digital sample table template**.

The **template** is available on our **homepage**.

<https://www.medizin.uni-muenster.de/en/core-facility-genomik.html>

Send it to coregenomik@uni-muenster.de along with **reference to your quote no.** and **this form**.

Customer comments and remarks:

To be filled by CoreFacility staff

Sample receipt:		By:	
Storage:			
Project start/end :			
Performed by:			
Comments and remarks:			