



Microarray



Sample Submission Form

Request ID*:	
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Sample reception date*:	
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*Compiled by Facility staff

Customer Information	
Date:	
Name:	
Phone:	
email:	
Group Leader:	
Institute:	

Sample Information	
Organism:	
Array type:	

To submit an experimental request to the Microarray Unit, fill in a row for each sample to be processed with all the required informations. Save the document and email it to genomicunit@kogentech.it PUTTING in CC YOUR GROUPLADER for approval. You will be provided with a reply email containing the Request Number ID associated to your submission. Raw data will be provided in .CEL format or summarized data values generated by Expression Console software (Affymetrix) can be provided on specific request.

Sample #	Sample Name	concentration (ng/ul)	total amount (ng)	comments