



APPLICATION FORM



Cytometry and Cell Sorting Core Facility

Referent :	Date:
Amendment :	Date:
Amendment :	Date:

Applicant

M^r, M^{rs} :

Status Trainee M2R PhD Student Postdoc ITA Researcher

Other :

Phone: _____ Fax: _____

E-mail: _____

Manager name: _____ Phone: _____

E-mail: _____

Laboratory : _____

Billing address : _____

Nature of the service (cf use agreement)

Indicate in a few lines the nature of your project : Please attach to this sheet a summary of your project **explaining the need to use cytometry and / or cell sorting.**

Project in collaboration with a private company yes no if yes, company's name: _____

SERVICE

Feasibility study

Feasibility study	<input type="checkbox"/> yes <input type="checkbox"/> no
Validation criteria	<input type="checkbox"/> internal controls <input type="checkbox"/> repeatability
Closing criteria	<input type="checkbox"/> nb of planned experiments: _____ and/or <input type="checkbox"/> expected realization time : _____

Working Independently

<input type="checkbox"/> Data acquisition	<input type="checkbox"/> Fortessa, LSRII Symphony <input type="checkbox"/> Trieurs <input type="checkbox"/> MACSQuants <input type="checkbox"/> ImageStreamX
<input type="checkbox"/> Data analysis	<input type="checkbox"/> FlowJo <input type="checkbox"/> Diva <input type="checkbox"/> IDEAS

Production – Expertise

Cytometry : Data acquisition ¹ Data analysis Cell sorting²

ImageStreamX: Data acquisition ³ Data analysis

Balance sheet 3months 6months 1year other :

I have read the sample preparation protocol (given by the cytometry facility) for:

¹ acquisition by cytometers

² cell sorting

³ acquisition by ImageStreamX

R&D Cytometry and cell sorting

Project reference

Samples

Cell type used:

Human

Animal

Vegetal

Other (bacterium, microparticles...)

Fixation: no yes, wich one ?

Comes from a OGM: no yes, wich class ? N° declaration OGM :

For confidentiality and protection of computer data, the platform offers secure access only if the data is exported to the storage server (a login and password are assigned to each team). The data left on the acquisition computer is not secure.

The signatory of this service request undertakes to have read the use contract of the Platform TRI and the procedure's rules of the technical platform used and undertake to respect them. The person in charge of the user ensures by his signature that this one knows and applies the rules H&S in use in a laboratory.

The signature of the person in charge is valid for commitment to payment of benefits.

Signature/date:

User

User's manager

PF cytometry