

Epitranscriptomics and RNA Sequencing Core Facility (EpiRNA-Seq)

SERVICE REQUEST FORM

The purpose of this form is to enable us to identify your needs so that we can establish a service offer that is adapted to your request.

Contact information

Name, Firstname :

Email :

Phone :

Laboratory :

Address :

ZipCode :

City :

Name, Firstname of the PI (if different from contact person) :

If the paying agency is different from the laboratory, please provide details :

Project

Title of the project :

Acronyme :

Name, Firstname of the scientific coordinator of the project (if different from contact person) :

Involvement of the EpiRNA-Seq Core Facility :

Collaborative Mode (members pricing)*

**The collaborative mode implies that the person(s) of the facility involved in the project is co-author(s) of the publication(s) or communication(s) using the results generated on the facility.*

Academia Mode

Industrial Mode

Requested service

Number of samples :

Organism / Species :

Requested service :

Quality control (Bioanalyzer) : PicoRNA SmallRNA HSDNA

RNA extraction (option available only if the core facility is also taking care of your samples for library preparation and sequencing)

Transcriptomics : RNA-Seq (polyA+ or Ribozero) or Small-RNA Seq

DNasequencing : Genomic DNA or enriched DNA (exomes)

Epitranscriptomics : RiboMethseq : rRNA or tRNA or other (contact us)
AlkAniline-seq

Other : Please contact the head of the core facility

Requested sequencing mode :

Single read or Paired end

Requested length of reads :

Bioinformatic analysis : Yes No

PI

Name :

Date :

Signature

The User

Name :

Date :

Signature