University of Rochester Functional Genomics Center

Microarray Core Facility Sample Registration

Please note that all fields must be filled out or sample processing will be delayed
Tail snip samples must be submitted in a 96 deep well plate and the plate format must be provided (see below).

Contact Information

Name	
Lab/ P.I.	
E-mail	
Phone #	
Plate #	
Account #	

Sample Processing:

	YES	NO	# of samples
Digestion			
Extraction			
PCR			

Genotyping Assays to be run:

Comments:

Plate Format:

	1	2	3	4	5	6	7	8	9	10	11	12
A												
B												
C												
D												
E												
F												
G												
H												