Cell sorting form - CAF

Please fulfill this form and send it to sarah.cattin@unifr.ch in order to get an appointment and discuss your experiment needs.

Full Name

Phone

Email

Group leader

Department

Institution/Company & Address

Sample informations:

☐ **Human** ☐ **Mouse** ☐ **Other**

☐ **Primary cells** ☐ **Cell line**

☐ **Fresh cells** ☐ **Fixed cells**

☐ **BSL-1** ☐ **BSL-2**

Cell type/name:

Where the cells infected and when?

If fixed: with what?

If BSL-2, is there infectious agents?

Describe in few words your experiment (cell type, goal, what you will do with the cells after sorting):

Cell sorting informations:

Total number of samples to sort:

Sort parameters: ☐ **Sterile** ☐ **Non-sterile**

You want to sort your cells in:

- ☐ **5ml FACS tubes**
- ☐ **1.5ml Eppendorf**
- ☐ **96 well plate**
- ☐ **15ml tube**
- ☐ **I don't know yet**

Your panel (fluorochromes + antibodies used):

Populations to sort *(max. 4 at the same time)*:

Approximate % of total cell population:

Desired number of sorted cells:

I have read carefully and filled correctly this formulary.
I certify the information provided to be correct.

Date & Signature