



FAX this sheet to 203-785-7919
Keck Biotechnology Resource Laboratory
Yale Researcher Microarray Resource Service Request Form

Order Date:

MM	DD	YY

Your Name: _____
Last Name First Name MI

PI Name: _____
Last Name First Name MI

PI E-mail: _____ PI Phone: () - _____

Department: _____ Yale Cancer Center Member? YES NO

Room #: _____ Building: _____

Your Phone: () - _____ Fax: () - _____ E-mail: _____

Yale Charging Instructions:

Project	Task	Award	Expenditure Type	Organization
			8 3 3 6 0 0	

Check here if HHMI investigator

Services Requested	Number of Samples/Slides	Slide Name & ID
Custom arraying of oligos, PCR products		
Custom arraying of proteins		
Microarray slide type		
aa-dUTP: Cy-3/Cy-5 labeling		
Genisphere™ labeling		
Qiagen HiLight – RLS labeling		
Hybridization		
Slide imaging (.tiff file) only		
Cy-3/Cy-5Axon GenePix primary analysis and text file		

Please contact Microarray Staff and then FAX this sheet to 203-785-7919

For further information and to discuss details of projects please contact [Janet Hager](#), [Lesla Clarke](#), [Irina Tikhonova](#), [Reema Gulati](#) by E-mail or phone 785-5111, 785-7945, or 785-5209 or visit the Microarray Resource at 300 George Street, Suite 2110.

For Credit Card charging instructions please see <http://info.med.yale.edu/wmkeck/creditcard.htm> Questions should be addressed to [Kim Jones](#), Phone (203) 785-6589 or FAX (203) 785-2096