Wyoming Sensory Biology Center

Sequence Request Form
(For NextSeq 1000)

Integrated Microscopy Core

** The following information is critical to correctly processing your samples and sequencing runs. Missing or incorrect information on this form can lead to run failures********

DATE:_____

Submitter: _____; E-mail: _____

PI: _____; E-mail: _____

Number of samples: _____; Are your samples pooled? Yes _____; No _____

Library prep kit: _____

Index Adapter Kit: _____

Index type: No Index _____; 1 Index _____; 2 indexes _____

Index length/Read: Index 1: _____; Read 1: _____

Index 2: _____; Read 2: _____

Custom Primers? _____

Sample Buffer: _____

Sample Data:

	Sample ID	Well Position	I7 index	Index 1	I5 Index	Index 2
1						
2						
3						
4						

Acknowledgement (must be signed by the PI of the lab)

1). I understand the user fee policy and have funds available to pay for the sequencing runs.

2). I will comply with the *Publication* and *Grant Acknowledgement* policies as outlined in the sequencing instruction.

_____   _____
            PI's signature   Date