DLAR Cryopreservation Services Request Form

Investigator Information

PI Name:	Department:
Email:	Phone:
Contact Person:	Email:
Phone (work):	
IACUC Information	
Protocol Number:	Expiration Date:
Account Number:	
	Animal Information
Species:	Genotype:
Background Strain(s):	
Reproductive History:	
Are there any known health or husband	
Current Housing Location:	
DOB of Males:	
Cage Card Number(s):	
	Services Requested

☐ Cryopreservat	tion of sperm
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[☐] Long-Term Storage of Samples in LN2

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Form Instructions

One Strain per form

How to Submit this Form:

Email: Complete form, push SUBMIT button to submit via email to Dr. Kincer and Kristin Fox

Fax: Complete form, Print and fax to (859) 323-6002

Drop Off: Complete form, print, and drop off to Dr. Kincer or Kristin Fox

Question regarding this form Contact Dr. Jeanie Kincer at (859) 323-5469 or Kristin Fox at (859) 562-0159

Use of the DLAR-ECRC requires IACUC approval of the project and transfer of the mice to the DLAR-ECRC protocol (Protocol #2019-3246). Please be sure you are transferring animals from a protocol which includes the use of the core. If the animals are on a different protocol, a separate transfer to the protocol in which core use is approved must be completed in Cayuse AO prior to transfer to the core.