High-throughput Imaging Facility

User Details

Mobile Number:	
Lab Extension Number:	
Lab Name:	
Research Supervisor:	
Guide/PI Emp. Code:	
Sample Information	
1. Description of the sample to be imaged:	
(e.g. Fixed mammalian cells, live bacteria in Petri dish, etc. Please provide maximum deta	ils)
2. Number of samples to be imaged in one slot:	(select option)
3. Fluorophores present in the sample:	
□ DAPI □ GFP □ DsRed □ CY5	
4. Type of Measurement required:	
 ☐ Multicolour confocal imaging ☐ Z-stack imaging ☐ Live cell imaging ☐ Tile scan (Multi-position imaging) 	
5. No. of hours of imaging required (for Live cell imaging):	
5. Special requirements if any:	