**SERVICE REQUISITION FORM**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Institute:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact No.:</td>
<td>Email:</td>
</tr>
<tr>
<td>Project Title:</td>
<td></td>
</tr>
</tbody>
</table>

**Type of service required**

*Research services*

Researchers can access our following research services for their research.

<table>
<thead>
<tr>
<th>Rental spaces for research projects</th>
<th>Clinical trials, epidemiological studies</th>
<th>Processing/ Storage of samples</th>
<th>Pathology validation services</th>
</tr>
</thead>
<tbody>
<tr>
<td>-80°C</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-198°C</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>-20°C</td>
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<tr>
<td>Custodial collection services</td>
<td>Molecular and proteomic analysis</td>
<td>Customized collection and/or processing services in the areas of DNA/RNA expression profiling</td>
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<tr>
<td>Intellectual services</td>
<td>Mutational analysis</td>
<td>Cytopathology</td>
<td>Histopathology</td>
</tr>
<tr>
<td>Customized datasets</td>
<td>Tissue Microarrays</td>
<td>NGS</td>
<td>FACS</td>
</tr>
<tr>
<td>DNA/RNA Extraction</td>
<td>Genotyping</td>
<td>Microarrays</td>
<td>Any Other (Specify)</td>
</tr>
</tbody>
</table>

**Specify Preferred Services**
**Biobanking Services**

*Sample Collection/ Deposition*

Average size of tissue released is 5mm; whole blood released: 1.5 ml (1 tube); serum released: 0.5ml (1 tube) and plasma 0.5 ml unless specified.

- [ ] Frozen Tissue
- [ ] Fresh Tissue
- [ ] FFPE Block
- [ ] Urine

- [ ] Matched Plasma
- [ ] Matched Serum
- [ ] Buccal Swab
- [ ] Faecal

- [ ] Matched Normal Tissues
- [ ] Matched Whole blood

**Specify Preferred Services**

Number of tissues requested: ____.

Rank your priority if more than two matched items are selected;

If you need Biosamples other than the listed names, please specify.

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**Name, Signature & Date:**

PI/User/Receiving technician

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**Sign & Stamp**

Reviewed & verified by biobank manager

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**Consigned to Courier/Self/Biobank staff**

Name: ............................................................................

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**Sign & date:** .................................................................