

VCF Project No.:	Virus No.:
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User information:

Name: _____ Group leader: _____

Lab genetic engineering facility number: _____

Lab Bio Safety level of user: _____ S1 S2

Vector service: Shuttle vector plasmid name: _____	
Shuttle vector properties (Promoter, GOI, reporter gene)	_____
Shuttle vector provided by the user:	No Yes
Shuttle vector cloned by VCF:	No Yes , Virus number BL-
Generation of new vector by VCF: Cloning description with dates:	No Yes , cloning by: _____
Plasmid DNA preparation for transfection:	No Yes , preparation by: _____ Prep Date: _____

Virus request: No Yes , done by: _____			
HEK cell seeding date:	Transfection method:	Transfection date:	
Shuttle vector:	Prep date:	Transfection (%), evaluation HEK cells:	
Packaging plasmid:	Prep date:		
Envelope plasmid:	Prep date:	Harvest date:	Volume:

Virus quantification / efficiency test:						
Quantification by reporter gene expression in cell cultures:					No Yes , done by: _____	
Cell-culture:	#Cell / date:	Viruses (µl):	Transducing date:	Counting date:	Titer (IU/ml):	µl 100% recom.:
Quantification by qPCR of viral genome: Titer done with abm LV900					No Yes , done by: _____	
qPCR date:		Titer:		(attached are the Roche lightcycler sheets)		
Efficiency test by qPCR of transcript of GOI or shRNA kd:					No Yes , done by: _____	
Cell-culture:	#Cell / date:	Viruses (µl):	Transducing date:	Cell lysis date:	cDNA date:	qPCR date:
Roche UPL #				% Expression from WT cells (per virus amount):		
Primer seq. fw: 5'-3'						
Primer seq. rev: 5'-3'		(attached are the Roche lightcycler sheets)				
Efficiency test by Western Blotting:					No Yes , done by: _____	
Cell-culture:	#Cell / date:	Viruses (µl):	Transducing date:	Cell lysis date:	Protein (µg/µl):	Proteins / WBlot (date)
Prim. Antibody (Name/company):				Dilution 1.AB:	Incubation date:	ECL date:
Sec. Antibody (Name/company):				Dilution 2.AB:	% Expression from WT cells.	

Date project start:	Date material released to user:
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