**Lentivirus/Retrovirus vector Packaging 慢病毒逆转录病毒载体包装**

* Please Email the completed form to [VectorCore@cibr.ac.cn](mailto:VectorCore@cibr.ac.cn) and cc it to the PI and [zhaofei@cibr.ac.cn](mailto:zhaofei@cibr.ac.cn). 请填写表格并发送至[VectorCore@cibr.ac.cn](mailto:VectorCore@cibr.ac.cn)，同时抄送给实验室负责人和[zhaofei@cibr.ac.cn](mailto:zhaofei@cibr.ac.cn)。

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| **Principal Investigator**  **实验室负责人** | | : PI name / 实验室负责人 | | | **Service Requester**  **服务申请人** | | | | : Requester / 申请人 | | | |
| 🖂: PI Email / 实验室负责人邮箱  🕾: PI Phone # / 实验室负责人电话 | | | 🖂: Requester Email / 申请人邮箱  🕾: Requester phone # / 申请人电话 | | | |
|  | | | | | | | | | | | | |
| **Project Information 详细信息** | | | | | | | | | | | **Filled by VC staff**  **载体中心填写** | |
| **#** | **Construct name / plasmid #**  **载体名称 或 质粒编号** | | | **Material provided**  **材料提供** | | **Vector type**  **载体种类** | **Concentrating?**  **是否需要浓缩** | | | **Sharing**  **共享** | **Vol.**  **(μl)** | **Titer**  **(× gc/ml)** |
| **1** | Vector name or plasmid # | | | Material provided | | Vector Type | Concentrating? | | | Share? | Vol. | Titer |
| **2** | Vector name or plasmid # | | | Material provided | | Vector Type | Concentrating? | | | Share? | Vol. | Titer |
| **3** | Vector name or plasmid # | | | Material provided | | Vector Type | Concentrating? | | | Share? | Vol. | Titer |
| **4** | Vector name or plasmid # | | | Material provided | | Vector Type | Concentrating? | | | Share? | Vol. | Titer |
| **5** | Vector name or plasmid # | | | Material provided | | Vector Type | Concentrating? | | | Share? | Vol. | Titer |
| **6** | Vector name or plasmid # | | | Material provided | | Vector Type | Concentrating? | | | Share? | Vol. | Titer |
| **Comment 备注** (Please note here if concentrating is required.)  Click to input comments 请单击输入备注 | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **Requester 申请人**  **Signature 签字** | | | **PI signature 实验室负责人签字**  **(if required 如果需要)** | | | | | **Receiver 领取人**  **Signature 签字** | | | | |
| **Requesting date申请日期** Choose the date | | | | | | | | **Delivering date 完成日期 Write date** | | | | |

Note 注意：**1.** The default lentivirus/retrovirus packaging quantity is 1×15cm dishes. Please make comment if a larger scale is required. 默认慢病毒/逆转录病毒包装量为1个15cm培养皿，如果需要更大包装量请注明。**2.** Please confirm the provided construct, as well as the expression cassette, is correct. 请务必确认所提供质粒和表达框的正确性。**3.** It is strongly recommended to aliquot the vector to appropriate volume and stored at -80oC immediately after receiving it, and avoid repeatedly freezing/thawing. 强烈建议在收到病毒载体后尽快分装为合适的体积储存于-80oC，并避免反复冻融。**4.** Lenti-/retro-virus vector must be handled in (A)BSL-2 laboratory. Please strictly follow the biosafety regulation. 慢/逆转录病毒载体必须在(A)BSL-2实验室操作，请严格遵守生物安全制度。