



# CENTER FOR DNA FINGERPRINTING AND DIAGNOSTICS

SOPHISTICATED EQUIPMENT FACILITY

UPPAL, HYDERABAD

## RT-PCR-REQUISITION FORM

NAME			DATE :
GROUP / SUPERVISOR			
INSTITUTION	a) CDFD [ ]	b) Academic [ ]	c) Industry [ ]
NO.OF. SAMPLES			
SERVICE	a) Processing & scanning	b) Scanning	
ANALYSIS	a) Std. Curve [ ]	b) Amplification Plot [ ]	
SAMPLE INFORMATION Reaction volume(25ul)	a)Volume of template(1-4ul):	b)Primer Conc.(2-2.5ul):	
	c)Annealing Temp:	d)Data acquisition step:	
Name of the Sample & Primer			
DECLARATION	This is to certify that these samples do not contain Radioactive material  Signature <input type="text"/>		

This is to submit that Content of this report is meant for our information only and we will not use the content of this report for advertisement, evidence, litigation or quote as certificate to third party.

Signature of Student

Signature of the Group Head