

**Real-time PCR (SYBR Green) Work Order**

Name:

PI/Lab:

Date:

Phone:

e-mail:

**Project Description:**

Original samples to quantify: \_\_\_ RNA \_\_\_ DNA

Quantity and quality of RNA/DNA (please attach Nanodrop report and gel photo)

If RT reaction required, indicate primer to be used (poly-dT is used unless otherwise indicated):

Samples/Primers (including endogenous control) for the real-time PCR:

**Type of RNA/DNA:**

RNA:

\_\_\_ total RNA

\_\_\_ mRNA

\_\_\_ other: \_\_\_\_\_

DNA:

\_\_\_ plasmid

\_\_\_ cDNA

\_\_\_ other: \_\_\_\_\_

**RNA/DNA purification history:**

\_\_\_ Trizol / Phenol:Chloroform

\_\_\_ Column (gDNA eliminator column? \_\_\_ YES \_\_\_ NO)

\_\_\_ Other \_\_\_\_\_

RNA treated with DNase? \_\_\_ YES \_\_\_ NO

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Budget number to be charged:

Authorized Signature:

(person signing above should have Signature Authority over Grant funding)

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**For use by Molecular Cloning Facility:**

Work done by:

Comments:

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Picked up by:

Date: