



# National Genomic Resources Repository

NBPGR, New Delhi

## Request Form

Basic Information of the Recipient			
Name & Institution			
Address			
E-mail			
Phone		Mobile Phone	
Fax.			

Requested DNA	
Genus Name	
Species Name	
Accession Nos.	(Please use other blank paper if you have space limitation)
Shipping Method	1) Dry Ice shipping <input type="checkbox"/> 2) Ice Pack shipping <input type="checkbox"/>

In case of library, give details of the clones, replications etc.

<b>Background Information of the Research Project</b>	
<b>Project Name</b>	
<b>Project PI</b>	(Name): (Institute):
<b>Project Description</b>	
<b>Funding Agency</b>	
<b>List of collaborators/partners if any along with their affiliations</b>	

1. Agreed to all the terms and conditions mentioned in the MTA.
2. I am aware that the all the terms and conditions also apply to all my partners, students, co-workers and I shall be responsible for the same.

Signature of the recipient/s

Date

Place

Signature of the authority

Date

Place

<b>For the office use:</b>	
1. Request approved	Yes/No
2. List attached	Yes/No
3. User ID given	_____
Signature of the Section In-charge	
Signature of the Repository Authority	