**BIOSPECIMEN REQUEST FORM**

For academic investigators, the biospecimen shall be provided at no cost for its preparation except for the distribution costs (shipping fee). **In principle, a fee is requested for the provision of Biospecimen to for-profit organizations. Please make enquires with JAXA in such case.**

**1. Investigator information**

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| --- |
| **Principal** **Investigator (PI)** |
| Name |  |
| Title |  |
| Nationality | Please select an applicable answer. |
| Country of residence | Please select an applicable answer. |
| Institution |  |
| Department |  |
| Address |  |
| E-mail |  |
| Phone |  |
| **Authorized Representative (e.g., Intellectual Property Department)** |
| Name |  |
| Title |  |
| Institution |  |
| Department |  |
| Address |  |
| E-mail |  |
| Phone |  |
| **Contact person (if necessary)** |
| Name |  |
| Title |  |
| Institution |  |
| Department |  |
| Address |  |
| E-mail |  |
| Phone |  |

**2. Principal Investigator’s papers (correspondence papers only)**

**(e.g., Suzuki T et al., *Commun Biol.,* 2020 Sep. 8;3(1):496))**

This information is used for confirmation of the PI’s Institution/ Department/Address/ E-mail.

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**3.** **Biospecimen Request**

|  |  |  |
| --- | --- | --- |
| **No.** | **Tissue No.** | **Tissue name** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| e.g. | 1-4 | Skin A |

**4. Sample request description (Please provide a brief description of your project, the objectives, and how the samples will be utilized.)**

|  |
| --- |
| **Purpose of Use:****Research Description:** |

**5. Shipping company Account No. (e.g., World Courier Account No.)**

The biospecimen shall be provided at no cost for its preparation except for the distribution costs (shipping fee).

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**For JAXA personnel use only**

**1. Availability of Tissues**

|  |  |  |  |
| --- | --- | --- | --- |
| No. | Tissue No. | Tissue name | Remarks |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |

**2. Confirm of Investigator information**

|  |  |  |
| --- | --- | --- |
|  | Principal Investigator (PI) | Remarks |
| Name |  |  |
| Title |  |  |
| Nationality |  |  |
| Country of residence |  |  |
| Institution |  |  |
| Department |  |  |
| Address |  |  |
| E-mail |  |  |
| Phone |  |  |

**3. Shipping company Account No. (e.g., World Courier Account No.)**

|  |  |
| --- | --- |
|  |  |

**4. Approvals**

JAXA Biorepository Personnel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_

JAXA Rodent Mission Manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_

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