GaP Facility – CREAIT Network, Memorial University of Newfoundland

DNA Sequencing Sample List

Name: _____ Date of sample submission: _____

E-mail: _____ Phone number: _____

ID	Sample name	Type of DNA (e.g. PCR product, ector)	Size of template (in Kb [total])	Size of insert (in Kb)	DNA conc. (ng/µL)	Primer(s) (e.g. M13F, M13R)	Primer conc. (pmol/µL)	Difficult template? (e.g. GC rich, poly-a tails, homopolymers)
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								