Our team of cell line engineers will evaluate your project and provide a quote.

**Basic Info**

|  |  |
| --- | --- |
| Name |  |
| Company / Institution |  |
| Job title |  |
| Phone |  |
| Work email |  |
| Country |  |
| Project objective□KnockIn □KnockOut □Point Mutation □Overexpression □KnockDown □Others (Please note: ) |
| **Target gene** |
| Name |  |
| ID |  |
| **Cell line** |
| Cell name |  |
| How would you like to obtain the cell lines?□AcceGen □By your own laboratory □Others:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Cell Count (per vial) |  |
| Growth condition (Medium) |  |
| Storage condition |  |
| Growth property□Adherent □Suspension □Semi-adherent □Others |
| Is the monoclonal forming capability tested?□Yes □No |
| Are there any splice variant in your gene in your chosen host cell line?□Yes □No |
| Are there any known SNPs in your gene in your chosen host line?□Yes □No |
| How many alleles do you wish to modify?□All □One □ Others:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Any special growth requirements? |
| **Additional information** |
| Do you suspect that the modification will affect cell growth or viability?□Yes □No |
| If possible, please provide the sequence to be modified (as cDNA +/- 200bp) with specified mutation(s) marked: |

**If you would like to provide cells by your own, please read the tips:**

1. Cryopreservation of cells: 1.5-1.8ml of the media should be put into the cryopreservation tube, and the number of cells should reach at least 1×106. It is recommended to culture cells in 25cm2 flask until the logarithmic growth phase, and freeze each flask into one tube to ensure the number of cells. Fill your delivered foam containers with dry ice. Please send the cells that have been frozen within the last 2 months.

2. If you provide the cells, please ensure that the cells are in good growth state, free from pollution and suitable for transfection. Also, please ensure the accuracy and authenticity of the materials provided.