CETI Waiver Application for NextGen Sequencing

| 1. | Name: | | | | | |
|----|---|----------------------|--------------------|--|--|--|
| | Email: | | Phone: | | | |
| | | | | | | |
| 2. | UNM Department | | <u>-</u> | | | |
| | Faculty | | | | | |
| | Staff | | | | | |
| | Postdoctoral | | | | | |
| 3. | Instrument: | Illumina NextSeq 500 | Roche 454 FLX Plus | | | |
| 4. | Please provide a short abstract of the proposed project (no more than 200 words). | | | | | |



| 5. | Is the work proposed part of a currently funded project? | | | | |
|----|--|-----------------|--|-----------------------|--|
| | Yes | | inding source? | | |
| | No | Is there a plar | nned submission? | | |
| | | Yes | Name of Agency: | | |
| | | No | Likely submission date: | | |
| 6. | | | uencing will be performed by CETI and MBF staff be of sample will you be supplying? | You will only need to | |
| | Genomic DNA | | | | |
| | BAC clones | | | | |
| | Amplio | | | | |
| | cDNA | | | | |
| | Total F | RNA | | | |
| | poly-A RNA | | | | |
| | Other | | | | |
| 7. | What type or | size of run you | will be requesting? | | |

- 7
 - a. Number of libraries
 - b. Number of reads per library

