**Newcastle MRB Sample Receipt Form**

**Please complete and return form to** [**NMRBiobank@ncl.ac.uk**](mailto:NMRBiobank@ncl.ac.uk) **within 5 working days of sample receipt.**

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| **APPLICANT DETAILS** | | | | | | |
| Name | |  | | | | |
| Institution/Organisation | |  | | | | |
| Email address | |  | | | | |
| **APPLICATION DETAILS** | | | | | | |
| Application ID | |  | | | | |
| Project title | |  | | | | |
| Are these re-issued samples? | | YES/NO | If **YES**, re-issue ID | |  | |
| **SAMPLES RECEIVED** | | | | | | |
| **Biobank ID** | | | **Quantity received** | | | |
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| Date of receipt of samples | |  | | | | |
| **ACKNOWLEDGEMENT OF SAMPLE RECEIPT** | | | | | | |
| I hereby confirm safe receipt of all samples requested and granted as part of the Newcastle MRB application mentioned above. | | | | | | |
| Signature |  | | | Date | |  |

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| **MRB USE ONLY** | | | |
| Material return required | YES/NO | | |
| MRB Lab Scientist name and signature on return |  | Date |  |