**VVCC PROJECT REQUEST FORM**

*Please email the completed form to Dr. Ezequiel Marron (marro014@umn.edu)*

**Principal Investigator**

Name:       Email:

College/School:

Department:

**Project contact information (if not the PI)**

Name:       Email:

Telephone:

**Would you like to schedule an in-person consultation?** [ ]  Yes [ ]  No

**Type of project (check any/all that apply)**

[ ]  Custom DNA construct production

[ ]  AAV packaging

[ ]  Lentiviral packaging: [ ]  unconcentrated [ ]  purified/concentrated [ ]  titer by MOI

[ ]  Unsure

**Brief project description (use only the space provided)**

**What EFS account # should be charged at the completion of this project?**

**Does your project involve expression of a known toxin or oncogene, or disruption of a known tumor suppressor gene?**

[ ]  Yes [ ]  No

*The VVCC is unable to generate vectors requiring BSL3-level or greater containment*

**Do you have IBC approval to work with the proposed DNA construct and/or viral vector?**

[ ]  Yes Protocol #:       Most recent approval date:

[ ]  No

[ ]  Submitted/pending

*IBC approval is required before the recombinant agent(s) produced by the VVCC can be used within your lab. It is your responsibility to obtain IBC approval for any/all DNA reagents and/or viral vector(s) created for you by the VVCC and to include any relevant information in your IBC protocols related to the genetic payloads (e.g., genes, cDNAs, shRNAs, gRNAs) harbored within these tools. We strongly recommend that you submit an IBC protocol or amendment as soon as possible, since the IBC committee only reviews applications once each month and missing a submission deadline could delay your ability to begin work. Use of recombinant agents without IBC approval is a compliance violation and requires incident reporting to the NIH, your department leadership, the Vice President for Research, and the IBC. Please contact IBC administrative support staff (612-626-2161 or* *ibc@umn.edu**) with any questions related to obtaining approval for use of your recombinant agent(s).*

**Will your project require acquisition of DNA materials from external sources?**

[ ]  Yes [ ]  No [ ]  Unsure

*You are expected to obtain any DNA materials & Materials Transfer Agreements required for project completion.*