



Lighthouse User Access

Zentrum für Translationale Zellforschung (ZTZ)

Universitätsklinikum Freiburg

| Name: | |
|---|--|
| Tel. (Uniklinik or Institute): | |
| Mobile: | |
| E-Mail: | |
| Group Leader: | |
| Department/Institute: | |
| Access is requested to the following equipment/services: | |
| Cell sorting (must be accompanied by Biosafety Form) Beckman Coulter MoFlo Astrios BD FACSAria III BD FACSAria Fusion with biosafety hood | |
| FACS Analysis BD LSR Fortessa Beckman Coulter Gallios | |

| Imaging/Microscopy | |
|--|--|
| Zeiss LSM 880 AiryScan | |
| Zeiss LSM 710 Confocal | |
| Leica SP2 Confocal | |
| Olympus Scan^R High Conten | t Screening Station |
| Zeiss AxioImager upright widef | _ |
| Zeiss AxioObserver/Apotome in | |
| Quantitative/Digital PCR | |
| Roche LightCycler 480 | |
| BioRad QX100 ddPCR System | 1 |
| I have read and agree to abide by the | e Lighthouse Core Facility User Guidelines |
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| Signature User, Date | Signature Group Leader, Date |
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| _ | ility of any publications resulting from the use |
| of their equipment or services and list t acknowledgements section of the publi | the use of the Lighthouse Core Facility in the ication. |
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| Signature User, Date | Signature Group Leader, Date |
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