Please complete this form and submit it to **cgebm@abdn.ac.uk**. If you require Bioinformatics analysis as part of a sequencing project, this is not the correct form - please complete a [CGEBM project form](http://www.abdn.ac.uk/genomics/resources/using-cgebm-services/).

|  |  |
| --- | --- |
| Name |  |
| Name of PI |  |
| PI contact details (full postal, telephone, and email) |  |
| Affiliation (School/Institute)  (internal only) |  |

|  |  |
| --- | --- |
| Email address for data transfer (provide PI and relevant researchers emails) |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Services Required | | | | |
| Bioinformatics | Biostatistics | Data Management | Data Storage | Access to HPC |

**Please complete all costs associated with your project as per quotation provided by CGEBM**

|  |  |
| --- | --- |
| Bioinformatics costs |  |
| Biostatistics costs |  |
| Data storage costs | Please discuss with IT: Gail Smillie [gail.smillie@abdn.ac.uk](mailto:gail.smillie@abdn.ac.uk) |
| Data Management costs | Please discuss with IT |
| Miscellaneous costs |  |
| Access to HPCC (Maxwell) | Please discuss with IT, HPC Support: Naveed Khan, [n.khan@abdn.ac.uk](mailto:n.khan@abdn.ac.uk)    Applicable charges, as relevant: Analysis time/ cpu hours; Software installation; Resource charge (Applicable for high memory/ time resource requirements) |
| Total costs |  |

|  |  |
| --- | --- |
| Grant code  (project code/ sub-project code)  ***Internal clients*** | Please complete the budget code details to which you wish this project to be charged. When the project is complete you will be issued with an advice note and final costs confirmed and agreed with you prior to the grant being charged. |
| PO Number  ***External clients*** |  |

NOTE: Data storage, management and HPC are IT services and any associated costs should be paid directly to ITS. These are included here for the purposes of ensuring you have considered all IT services/ resource required to complete your planned project.

|  |  |
| --- | --- |
| Study title |  |
| Description of study |  |
| Does this study require Ethical Approval? | Yes/ No |
| Ethics Ref No  R&D ref No |  |
| Data generated by CGEBM will be stored on University of Aberdeen secure network drives. Data analysed within the CGEBM bioinformatics unit will also be transferred to the University of Aberdeen HPCC, Maxwell. CGEBM has no responsibility to obtain regulatory approvals for data storage and this is the sole responsibility of the PI named above. Please stipulate if you require alternative data storage and provide details here: | |

|  |  |
| --- | --- |
| Funding body |  |
| Study type (e.g. pilot, project grant, programme grant, fellowship) |  |
| Project start date |  |
| Duration of the project |  |
| Proposed CGEBM start date |  |
| Consultation date (CGEBM use) |  |

|  |  |
| --- | --- |
| Organism (common name) |  |
| Genus/ Species |  |
| Reference sequence for organism (Yes/No)  (Please provide details if Yes) |  |
| Size of target region (estimate if unknown, e.g. Genome, Transcriptome, amplicon) |  |
| Ploidy (e.g. Haploid, diploid, etc) |  |
| Application (e.g. WGS, WES, RNAseq, ChIPseq, BISseq, RADseq, metagenome, etc) |  |
| Sequencing Platform Used (e.g. Illumina MiSeq, Ion Proton etc) |  |
| Sequencing Details (read length, single or paired end, library preparation protocol) |  |
| Principal Aim (e.g. differential gene expression, SNP/ variant calling, de novo assembly, miRNA, methylated DNA, microbial diversity, etc) |  |
| Research questions/ aims to be addressed in this analysis (Please list all relevant primary and secondary aims and state if primary/ secondary. Please also provide relevant papers if specific methodology is needed) |  |
| Sample metadata (all relevant data, including experimental groups and batch data) |  |

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CGEBM use

|  |  |
| --- | --- |
| Date data received by CGEBM |  |
| Consultation date |  |
| Proposed start date |  |
| Date results required |  |
| Expected Completion Date |  |
| Completion Date |  |

CGEBM Description of analysis to be performed

|  |
| --- |
|  |

**To be completed and signed by PI prior to CGEBM commencing project:**

By signing this form you are agreeing to CGEBM staff performing the services specified, at the quoted cost and under our Terms and Conditions.

|  |  |
| --- | --- |
| Signature: |  |
| Date: |  |

**CGEBM Confidentiality Agreement**

CGEBM understand that the information received regarding project <PROJECT CODE> is confidential. Project information will only be discussed with the PI and project research team and staff in the Centre for Genome Enabled Biology and Medicine and will not be disclosed to any other individuals.

In the case where details are used for presentations, project details including research questions/ aims will be not be discussed or presented without the written consent of the principal investigator leading the project.

The parties acknowledge that they have read and understand this agreement.

**Name:**

*(On behalf of CGEBM)*

**Signed:**

**Date:**