**病原发现与大数据平台培训申请**

**Application for Technological & Instrumental Training**

**一、基本信息 PartⅠGeneral Information**

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| 姓名 Name | 隶属单位Unit | | 所在部门Department |
| 身份信息 Identity  P.I. Research Assistant Technician P.Doc Student Co-training Student  Temporary staff Others: | | | |
| 联系电话 Contact  Mobile: Office: | | 电子邮箱Email | |
| 申请培训范围 Training Scope  半数组织细胞感染量测定 TCID50  细胞毒性实验 MTT  罗氏核酸自动抽提仪 Roche MagNA Pure LC 2.0 Instrument  安捷伦2100生物分析仪 Agilent 2100 Bioanalyzer Instrument  荧光定量PCR仪 qPCR System | | | |

**二、相关工作经历调查 PartⅡ Related Working Experience Survey**

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| 1.是否通过生物安全实验室培训 Do you pass the BSL-2 training? 是YES 否NO |
| 2.是否有细胞培养经验 Do you have experience in cell culture? 是YES 否NO |
| 3.是否有病毒操作经验 Do you have operational experience in virus? 是YES 否NO |
| 4.是否有精密仪器操作经验  Do you have operational experience of precise instrument? 是YES 否NO |

**三、签名栏 Part Ⅲ Signature**

|  |  |
| --- | --- |
| 申请人Applicant | 日期Date |
| 研究组/部门负责人Department Head | 日期Date |

\*申请表需手写签名，无申请人或研究组/部门负责人签名的申请无效。

\*The application will be invalid without signatures.