**Fill out the form and submit to**[**animalerie.tg.cr.chum@ssss.gouv.qc.ca**](mailto:animalerie.tg.cr.chum@ssss.gouv.qc.ca)

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|  |  | |  | | **CRCHUM - internal use only** |
| **Date :** |  | |  | | **Request number :** |
| **SECTION 1 - GENERAL INFORMATION** | | | | | |
| **Investigator :** | | | | | |
| **E-mail :** | | | | **Telephone number:** | |
| **Contact person:** | | | | | |
| **E-mail :** | | | | **Telephone number:** | |
| **CRCHUM investigator** | | **External investigator** | | | |
| **Grant number :** | | **PO number :** | | | |

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| **SECTION 2 - CONSTRUCTION INFORMATION** | |
| **Species :** Mouse  Rat | |
| **Complete strain name** (exact nomenclature) : | |
| **Common name:** | |
| **Background strain: :** | |
| **Protocol number :** | |
| **Genetic modification desired :**  *Knockout*  Conditional *knockout*  *Knock in*  Point mutation  Other  Description of the DNA construct and the targeted gene(s):  **If necessary, provide relevant literature and references.** | |
| **Role of the gene(s) and expected phenotype(s):** | |
| **Method used for construction :** | |
| CRISPR/Cas9  Fill out section 3A | Nuclease or DNA microinjection  Fill out section 3B |
| Please note that you can take an appointment to discuss in detail the desired model and the possibilities we offer. | |
| **Background strain preferred for the microinjection?**  C57Bl/6  CD-1  B6C3F1  Other :  **Supplier:** Charles River  Jackson  Other | |
| **Comments :** | |

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| **SECTION 3A - CONSTRUCTION BY CRISPR/CAS9 DETAILS** | |
| **Do you want the transgenic laboratory to design and synthetize the guides (gRNA)?** | |
| Yes | No |
| Please contact the platform manager to discuss in detail the desired construction. | Guide(s) description :  Provide all necessary details: synthetic or *in vitro* transcribed (IVT), concentration, dilution buffer, origin, sequences ...  **Has their effectiveness been tested?**   Yes  No  If yes, describe the method and results  :  If no, the platform will do it for you. |
| **Do you have a preference for the Cas9 endonuclease used?**  Protein  mRNA  Both  No preference    Justification : | |
| **Does your model require the introduction of a donor DNA?** Yes  No  Describe :  If so, please provide the details on the donor DNA. | |
| **Comments :** | |

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| **SECTION 3B - CONSTRUCTION BY NUCLEASES OR DNA MICROINJECTION DETAILS** |
| **Method used for the construction :**  DNA microinjection  TALENs  ZFNs |
| **Describe the sequences or enzymes :**  Provide all necessary details: fragment size, sequences or mapping, concentration, dilution buffer, origin, photo of gel ...  **If your sequence is in the form of a plasmid, is it linearized?** Yes  No |
| **Comments :** |

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| **SECTION 4 - HEALTH MONITORING AND BREEDING** |
| If your veterinarian has asked for health tests on the animals generated, it will be necessary to wait until the health reports are sent to us before we can prepare the transport (on average, the animals will be 6 weeks of age). We will contact you and the coordinator of your institution to prepare the transport.  Please note that we offer breeding services if needed. |

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| **SECTION 5 - INTERNAL TRANSFER OF THE ANIMALS** | | |
| **CRCHUM** | Sector : | Room : |

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| **SECTION 6 - EXPORTATION (TO AN EXTERNAL FACILITY)** | | | | |
| We prioritize shipping all of the generated animals at the same time. If there’s a fairly large age gap between the litters, it could be less expensive to do more than one transport (the cost of transportation VS the cost of keeping the animals in the CRCHUM, e.g. perdiem, should be considered). | | | | |
| **Animal facility information** | | | | |
| Institution  : | | | | |
| Address : | | | | Postal/Zip code : |
| City : | Province/State : | | Country : | |
| Import/export contact : | | | | |
| E-mail : | | Telephone number: | | |
| Veterinarian : | | | | |
| E-mail : | | Telephone number : | | |