

**Department of Paediatrics and Adolescent Medicine  
The University of Hong Kong**

FACSAria Flow Cytometer New User Registration

Date: \_\_\_\_\_

Name of User: \_\_\_\_\_ Position: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Project title: \_\_\_\_\_

Supervisor or Principal Investigator: \_\_\_\_\_

Department: \_\_\_\_\_ Institution: \_\_\_\_\_

FACSAria Training Course Attended?     YES                       NO

*Please check the box if appropriate*

<b>Utility of FACSAria</b> <input type="checkbox"/> Analysis <input type="checkbox"/> Sorting
<b>Biosafety informations</b> Samples: <input type="checkbox"/> Human <input type="checkbox"/> Animal Biohazard samples? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>If YES, please complete the following</i> Type of Biohazard: <input type="checkbox"/> Level 1 <input type="checkbox"/> Level 2 Samples <i>fixed</i> ? <input type="checkbox"/> YES <input type="checkbox"/> NO Microorganism is <input type="checkbox"/> LIVE <input type="checkbox"/> DEAD
<b>Analysis software</b> Do you want to use Diva/Flow Jo for data analysis? <input type="checkbox"/> YES <input type="checkbox"/> NO

*Internal Remarks:*