

**HESC Request Form**

**Stem Cell Core  
University of Connecticut & Wesleyan University**

(Last revised 3-25-07)

**I. Principal Investigator Information.**

**Name:**

**Title:**

**Affiliation:**

**Address:**

**Phone:**

**Fax:**

**Email:**

**II. Purpose of the hESC Request.**

1. Title of the project
2. Summary of the project
  
3. Approximate timeline of the project

**III. Personnel Who Will Use the hESCs.**

<b>Name</b>	<b>Title</b>	<b>Work Experience</b>	<b>Training in hESC Culture</b>

**IV. Required Documents (attach):** Check “Cell lines available” at the web site of the Stem Cell Core (see links below) and prepare following documents:

1. A completed “Cell Request Form”.
2. Approval of your research project by the ESCRO of your institution.

3. Approvals of the MTA/MOU/SLA for the hESC line you request.
4. Certificate or proof of training in hESC culture, or explanation of exemption.

**IV. Selection of hESC lines that are available at the Core (check all that apply in the following table).**

Note: Two weeks advance notice is required for hESC lines whose availability is “Yes”; four weeks advance notice is required for hESC lines whose availability is “Not yet”. See the Core’s website for additional information on available hESC lines.

<b>Provider’s Code</b>	<b>NIH Code</b>	<b>Source</b>	<b>Federal Eligibility</b>	<b>Status</b>	<b>Availability for request</b>	<b>Check your selection</b>
H1	WA01	WiCell	Yes	Frozen	Not yet	
H7	WA07	WiCell	Yes	Frozen	Not yet	
H9	WA09	WiCell	Yes	In culture	Yes	
H13	WA13	WiCell	Yes	Frozen	Not yet	
H14	WA14	WiCell	Yes	Frozen	Not yet	
HES3-Envy	ES03 (derivative)	ESI	Yes	In culture	Yes	
HUES-1	N/A	Harvard University	No	Frozen	Not yet	
HUES-3	N/A	Harvard University	No	In culture	Yes	
HUES-9	N/A	Harvard University	No	Frozen	Not yet	

**V. Sharing hESCs.**

Recipients of hESCs obtained from the Core are not allowed to distribute the cells and their progenies to any third party without prior request to the Stem Cell Core and approval by the Core’s director.

**VII. Tracking materials.**

The Stem Cell Core will conduct an annual survey by contacting each PI who has received hESCs from the Core to request following information regarding the cells in his/her lab. Answering and returning the survey is mandated. The Core will report the survey to the ESCRO to assist its oversight of hESC-related research protocols.

<b>Sequential number of hESC line</b>	<b>1</b>	<b>2</b>	<b>3*</b>
<b>Provider’s code of the hESC line</b>			
<b>NIH code of the hESC line</b>			

<b>Starting passage #</b>			
<b>Current passage #</b>			
<b>Location of the cell line</b>			
<b>Cell quality update (attach a statement if necessary)</b>			
<b>Name of other PI(s) who shared the hESC line</b>			
<b>Publication(s) derived from the use of the hESC line</b>			
<b>Grant(s) derived from the use of the hESC line</b>			
<b>Comments</b>			

\* Add more columns by duplicating this table if more cell lines were obtained from the Stem Cell Core

#### **V. Charging Plan.**

Due to 50% budget cut in the state grant, the UConn Health Center Research Advisory Committee (HCRAC) has approved to fund the Core to establish a Cost Center. A charging plan is being developed for all the services the Core provides including live cultures of hESC lines.

#### **VI. Liability.**

The Stem Cell Core and its personnel are responsible only for the quality control of hESCs maintained at the Core and by the time of distribution. They shall not be held liable for any hazard or accident related to the use of the hESCs after their distribution. They shall not be held responsible or legally liable for any aspects of the research conducted with the distributed hESC lines by others or for the compliance of other recipients of the cell lines with federal, state, or institutional policies.

**I understand and agree with the above conditions, and agree to comply with all the MTA or licensing agreements with the owner(s) of the hESC line(s) I request. I also agree to comply with the policies and regulations of my institution, and all State and Federal agencies governing the use of hESCs.**

**Name of the PI** \_\_\_\_\_

**Signature of the PI** \_\_\_\_\_

**Date** \_\_\_\_\_

Please send the completed form and other required documents to the Stem Cell Core by mail at UConn Health Center, MC 3301, Room E2041, 263 Farmington Ave., Farmington, CT 06030. Also send a scanned copy of the above documents by email to BOTH [ucscicore@uchc.edu](mailto:ucscicore@uchc.edu) and [renhexu@uchc.edu](mailto:renhexu@uchc.edu).

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**Stem Cell Core Use Only:**

- Approved
- Needs more document (specify) \_\_\_\_\_
- Disapproved (specify reason) \_\_\_\_\_
- Other (specify) \_\_\_\_\_

Name of the Stem Cell Core Director \_\_\_\_\_

Signature of the Stem Cell Core Director \_\_\_\_\_

Date \_\_\_\_\_

**Related links**

Stem Cell Core of University of Connecticut and Wesleyan University:  
<http://genetics.uchc.edu/StemCell/index.htm>

University of Connecticut ESCRO:  
<http://www.escro.uconn.edu/>

NIH hESC Registry:  
<http://stemcells.nih.gov/research/registry/defaultpage.asp>

National Institutes of Health resource for stem cell research  
<http://stemcells.nih.gov/info/faqs.asp>

WiCell Research Institute:  
[http://www.wicell.org/index.php?option=com\\_content&task=blogcategory&id=124&Itemid=190](http://www.wicell.org/index.php?option=com_content&task=blogcategory&id=124&Itemid=190)

Harvard Stem Cell Institute:

<http://www.mcb.harvard.edu/melton/hues>

ES International:

<http://www.escellinternational.com/>