

BSL-3 FACILITY RAJIV GANDHI CENTRE FOR BIOTECHNOLOGY CAMPUS-2-AKKULAM, THIRUVANANTHAPURAM

FACILITY ACCESS REQUEST AND APPLICATION FORM FOR RGCB USERS

SOP No: BSL3/RGCB/SOP/004

- 1. Requested by (Name of Contact):
- 2. Department/Laboratory:
- 3. Contact Details:
 - a) Mobile Number-
 - b) E-mail ID –
- 4. Brief Detail of the work to be carried out in BSL-3 facility

(Please provide a detailed outline as an attachment of the proposed work to be carried out in the BSL-3 facility, including a Pathogen Data Sheet. Detailed Standard Operating Procedures (SOPs) should be made available upon request.)

Signature:

Place:

Date: