

NanoFCM Flow NanoAnalyzer Application Form

General Information

First Name

Last Name

Title

University/Company

Address

E-mail Address

Phone

Website

Research Interests/
Principal Service

Description of the Application

Currently Available Instruments/
Methods

Drawbacks of Existing
Instruments/Methods

Expected Function of Flow
NanoAnalyzer

Sample Types and Parameters
(Please provide detailed information, including sample source, number, dyes (Antibodies), and the number of fluorescent channels)

When would you like to start your trial? How long do you expect for the testing?

If Flow NanoAnalyzer meets your requirements, are you willing to purchase one? Yes No

If Yes, intended purchasing time

If you are testing Exosomes/ Extracellular Vesicles, do you have an ultracentrifuge? Yes No
Rotor Type

IMPORTANT NOTE:

The Applicant's Affiliation might need to cover part of the cost for the trial, including the transportation cost of the instrument, and the travel and accommodation fee of our technicians.

The information filled must be truthful and accurate, for further verification.

Please send this form to E-mail: lingma@nanofcm.com

NanoFCM Inc. reserves the right of final explanation and revision for the application form.



NanoFCM Inc.

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