|  |  |  |  |
| --- | --- | --- | --- |
| Date |  | Campus From |  |
| Scheduled Time of Departure |  | Campus To |  |
| Name of Carrier |  | Contact Phone Number |  |
| Name of Driver |  | | |
| Alternative Contact |  | Contact Phone Number |  |
| Name + UN number of sample/ quantity per inner package/ total quantity | +UN1845 if on dry ice | | |
|
| All samples must be packed in accordance with the ‘Packaging Samples for Transportation between Campuses’ guidance note | | | |
| Packaging method must be signed off by line manager / lab manager / PI | | | |
| Authorised By |  | | |