|  |  |  |  |
| --- | --- | --- | --- |
| 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 |   |