

THE BBSA YEAST CULTURE COLLECTION, UNIVERSITY OF THE FREE STATE

Accession Form No. _____

UFS Collection Number: **UOFS Y-**_____ / _____

Received from: _____

Date received: _____

Store: -70°C: _____ -196°C: _____

pr: _____ : _____ done by: _____

NOMENCLATURE DATA :

Species: _____

Your Strain Number/Equivalent numbers: _____

HISTORY [if previously received from a different source]:

[received from] _____

[address] _____

ISOLATION:

Isolated by: _____ Date: _____

Isolated or derived from [please give all details of habitat]: _____

Sample collected by: _____

Identified by: _____ Date of ID: _____

Special characteristics for identification: _____

MAINTENANCE

medium: _____

temperature: _____ an-/aerobic: _____ aeration: _____ incubation time: _____

Recommended method of preservation:

GENOTYPE / SPECIAL FEATURES

APPLICATIONS

REFERENCES

REDISTRIBUTION / RESTRICTED

This material is considered free for distribution: **YES / NO**

This material is restricted **BUT MAY BE USED IN DEPARTMENT / *MAY BE USED WITH MY PERMISSION* / FULLY RESTRICTED.**

Please indicate the period of restriction: _____

Signature: _____ Date: _____

Comments: _____
