

Loughborough University	Authorisation to Acquire or Transfer HTA Licensable Material		
The Centre for Biological Engineering			
Doc Ref: HTA-PR-FORM/011	Version N ^o :	1.0	Issue Date:

AAT No: CBE/AAT/00036	<input checked="" type="checkbox"/> Incoming material <input type="checkbox"/> Outgoing material
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To be completed by the Principal Investigator or Person Responsible for the acquisition or transfer of HTA licensable material			
Name: Emily Xiang	Role: Research Associate		
Contact Details: Tel: Email:	Department: CBE		
Research Project Reference:	CBE BRA 218		
Research Project Title:	Analysing aging and exercise effects, biomarker development and study of mechanism of actions.		
Material Transfer Agreement Ref Number:			
Biological Risk Assessment Ref Number	BRA 218		
Supplier Organisation (as applicable):	Address: NCSEM	Country: Loughborough university, Leicestershire, uk	
If material is imported (from outside England, Wales and Northern Ireland) provide a brief statement of justification			
Destination Organisation (as applicable):	Address: CBE	Country: Loughborough university, Leicestershire, uk	
Type/ID of material: (eg primary cell, cell line, tissue, body fluid, excreta, biological agent)	Human muscle tissue biopsy		
Format / Quantity: (eg number of vials, slides, etc)	30- to 50-mg per sample		
Transport conditions:	In 9cm by 9cm sample storage boxes in a refrigerated transport box		
Fate of material following project completion:	<input type="checkbox"/> Return to provider <input type="checkbox"/> Transfer to another organisation <input type="checkbox"/> Retain <input checked="" type="checkbox"/> Dispose		
Proposed date of receipt or transfer	20/05/2025		
Authorisation for acquisition or transfer:			
Principal Investigator (PI) or Person Responsible:	Name: Yu Xiang	Signature: <i>Yu Xiang</i>	Date: 12/05/2025
Departmental Person Designate (dPD)	Name: Rob Thomas	Signature: <i>Rob Thomas</i>	Date: 21/05/2025
Designated Individual(DI) or Deputy DI or University PD (only required if the dPD is also the PI or dPD is unavailable)	Name:	Signature:	Date: