# PROTEOMICS BIOSCIENCE CORE LAB

# INSTRUMENT TRAINING CALENDAR

#### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for peptide analysis		
Capacity: 4	Capacity: 4		Capacity: 4	Capacity: 4		
Contact: Huma Khurram	Contact: Huma Khurram		Contact: Huma Khurram	Contact: Huoming Zhang		
			<u> </u>			
10	11 10:00	12	13	14	15	16
	Floid cell imaging					
	Capacity: 4					
	Contact: Kosuke Sakashita					
	Time: 11:00	9:00				
	Training Title: Ultracentrifuge	Protein expression & purification				
	Capacity: 4	Capacity: 4				
	Contact: Kosuke Sakashita	Contact: Kosuke Sakashita				
	13:00					
	Spectramax Plate reader Capacity: 4					
	Contact: Kosuke Sakashita					
	14:00	-				
	Monolith NT.115Pico					
	Capacity: 4					
	Contact: Kosuke Sakashita					
17	18	19	20	21	22	23
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for intact protein analysis		
Capacity: 4 Contact: Huma Khurram	Capacity: 4 Contact: Huoming Zhang		Capacity: 4 Contact: Huma Khurram	Capacity: 4 Contact: Huma Khurram		
CONTACT. Fluing Knuffdff	Contact. Fluoring Zriang	1	Contact. Fluina Kriunalli	Contact. Fluma Kriundili		
24	25	26	27	28	29	30
	10:00					
	Floid cell imaging					
1	Capacity: 4	1		1		

	Contact: Kosuke Sakashita	
ı	Time: 11:00	9:00
	Training Title: Ultracentrifuge	Biacore T200
	Capacity: 4	Capacity: 4
	Contact: Kosuke Sakashita	Contact: Kosuke Sakashita
	13:00	
	Spectramax Plate reader	
	Capacity: 4	
	Contact: Kosuke Sakashita	
	14:00	
	Monolith NT.115Pico	
	Capacity: 4	
	Contact: Kosuke Sakashita	

# Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for peptide analysis		
Capacity: 4	Capacity: 4		Capacity: 4	Capacity: 4		
Contact: Huma Khurram	Contact: Huma Khurram		Contact: Huma Khurram	Contact: Huoming Zhang		
	•					
8	9	10	11	12	13	14
	10:00					
	Floid cell imaging					
	Capacity: 4					
	Contact: Kosuke Sakashita					
	Time: 11:00	9:00				
	Training Title: Ultracentrifuge	Protein expression & purification				
	Capacity: 4	Capacity: 4				
	Contact: Kosuke Sakashita	Contact: Kosuke Sakashita				
	13:00	ornasii Hoodho Ganasiina				
	Spectramax Plate reader					
	Capacity: 4					
	Contact: Kosuke Sakashita					
	14:00					
	Monolith NT.115Pico					
	Capacity: 4					
	Contact: Kosuke Sakashita					
			-			
15	16	17	18	19	20	21
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for intact protein analysis		
Capacity: 4	Capacity: 4		Capacity: 4	Capacity: 4		
Contact: Huma Khurram	Contact: Huoming Zhang		Contact: Huma Khurram	Contact: Huma Khurram		
		1				
22	23	24	25	26	27	28
		-				
1	10:00	]				

	Floid cell imaging Capacity: 4 Contact: Kosuke Sakashita Time: 11:00  Training Title: Ultracentrifuge Capacity: 4 Contact: Kosuke Sakashita 13:00  Spectramax Plate reader Capacity: 4 Contact: Kosuke Sakashita 14:00  Monolith NT.115Pico Capacity: 4 Contact: Kosuke Sakashita	9:00 Biacore T200 Capacity: 4 Contact: Kosuke Sakashita		
29	30	31		

# BIOINFORMATICS BIOSCIENCE CORE LAB

#### INSTRUMENT TRAINING CALENDAR

#### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Time:	Time:	14:00-16:00	Time:		
Training Title:	Training Title:	Training Title:	BCL Bioinformatics clinic	Training Title:		
Capacity:	Capacity:	Capacity:	3	Capacity:		
Contact:	Contact:	Contact:	yoshinori.fukasawa@kaust.edu.sa	Contact:		

#### Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
8	9	10	11	12	13	14
Time:	Time:	Time:	14:00-16:00	Time:		
Training Title:	Training Title:	Training Title:	BCL Bioinformatics clinic	Training Title:		
Capacity:	Capacity:	Capacity:	3	Capacity:		
Contact:	Contact:	Contact:	voshinori.fukasawa@kaust.edu.sa	Contact:		
	•		-			
15	16	17	18	19	20	21
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	14:00-16:00	Time:		
Training Title:	Training Title:	Training Title:	BCL Bioinformatics clinic	Training Title:		
Capacity:	Capacity:	Capacity:	3	Capacity:		
Contact:	Contact:	Contact:	voshinori.fukasawa@kaust.edu.sa	Contact:		
	•		•			•
29	30	31			<u> </u>	
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

#### Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
	_	7	_			
5	6		8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:	''	
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
oontact.	Contact.	Contact.	Contact.	Contact.		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

#### Feb-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

#### Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	-			-		-
8	9	10	11	12	13	14
8 Time:	9 Time:	10 Time:	11 Time:	12 Time:	13	14
8 Time: Training Title:	9 Time: Training Title:	10	- "		13	14
		Time:	Time:	Time:	13	14
Training Title:	Training Title:	Time: Training Title:	Time: Training Title:	Time: Training Title:	13	14
Training Title: Capacity:	Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	13	14

Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	9:30-11:00 Practical Basic Linux for Biologists 40 issaac.rajan@kaust.edu.sa	Time: Training Title: Capacity: Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
29	30	31				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

# Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	_		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:	10	
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
		Capacity: Contact:				
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	9:30-10:30	Time:	• • • • • • • • • • • • • • • • • • • •	
Training Title:	Training Title:	Training Title:	duction to FastQC and its interpret	Training Title:		
Capacity:	Capacity:	Capacity:	40	Capacity:		
Contact:	Contact:	Contact:	issaac.rajan@kaust.edu.sa	Contact:		
	-					
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	27					
26		28	29	30		
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

# May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17				21		
	18	19	20		22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Z5 Time:	Time:	Time:	Time:	29	30
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

31			
Time:			
Training Title:			
Capacity: Contact:			
Contact:			

#### Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
	Time:	Time:	Time:	Time:		
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
7	8	9	10	11	12	13
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
14	15	16	17	18	19	20
Time:	Time:	Time:	Time:	Time:	19	20
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		-
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
oomadi.	Contact	Contact	oontaot.	oontdo.		
28	29	30				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				i i

# Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	7	8	9	40	11
				Time:	10	11
Time:	Time:	Time:	Time:	******		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
CONTROL.	Contact.	Contact.	Contact.	Contact.		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
			1		-	
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:					
Training Title:	Training Title:					
Capacity:	Capacity:					
Contact:	Contact:					

# Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
27	28	29	30			
Time:	Time:	Time:	Time:			
Training Title:	Training Title:	Training Title:	Training Title:			
Capacity:	Capacity:	Capacity:	Capacity:			
Contact:	Contact:	Contact:	Contact:			

#### Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time: Training Title: Capacity: Contact:		
	_	_	_	_		
4	5	6	7	8	9	10
Time: Training Title:						

Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
			•		•	•
18	19	20	21	22	23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
		Contact:	Contact:	Contact:		
		Contact:	Contact:	Contact:	30	31
Contact:	Contact:				30	31
Contact:	Contact:	27	28	29	30	31
Contact:  25 Time:	Contact:  26 Time:	27 Time:	28 Time:	29 Time:	30	31

- To register for tool training, the requester should:
  a. complete the "Lab Safety Training" (Conducted by HSE Department)
  b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
  c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
  d. register in the Badger Booking System

#### NGS, SINGLE CELL & FACS / FACS BIOSCIENCE CORE LAB

# INSTRUMENT TRAINING CALENDAR

#### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
		9:30	9:30			
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
	·	·	·	·		
10	11	12	13	14	15	16
17	18	19	20	21	22	23
		14:00	14:00			
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
24	25	26	27	28	29	30

#### Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
		9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa			
-						
8	9	10	11	12	13	14
15	16	17	18	19	20	21
	.0	14:00 Flow Cytometry Capacity: 3 <u>FACS@kaust.ed.usa</u>	14:00 Flow Cytometry Capacity: 3 <u>FACS@kaust.ed.usa</u>		10	
22	23	24	25	26	27	28
29	30	31				
		9:30 Flow Cytometry Capacity: 3 <u>FACS@kaust.ed.usa</u>				

#### Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
Ouri	INIOII	Tue	4	2		
			9:30	2	3	4
			Flow Cytometry			
			Capacity: 3			
			FACS@kaust.ed.usa			
_		_	-			
5	6	7	8	9	10	11
	l			l		
12	13	14	15	16	17	18
12	13	14:00	14:00	16		10
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
19	20	21	22	23	24	25
	I .			1		
26	27	28	29	30	31	
30		9:30	9:30			
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
	The second secon	i Acolwiaust.eu.usa	i Acojwaust.eu.usa			

#### Feb-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat				
2	3	4	5	6	7	8				
9	9 10 11 12 13 14 15									
9	10	14:00 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	14:00 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	13	14	15				
16	17	18	19	20	21	22				
23	24	25	26	27	28	29				
23	24	9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	21	20	29				

#### Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

8	9	10	11	12	13	14
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
15	16	17	18	19	20	21
Time:	Time:	Time:	Time:	Time:	20	
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
Contact.	contact.	Contact.	Contact.	Contact.		
29	30	31				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

# Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	_		
			Contact:	Contact:		
	•		=	•	•	•
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30		
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

# May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
,						
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
31						
Time:						
Training Title:						
Capacity:						
Contact:						

#### Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
	Time:	Time:	Time:	Time:		
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
7	8	9	10	11	12	13
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
14	15	16	17	18	19	20
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
28	29	30				
Time:	Z9 Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity: Contact:	Capacity: Contact:	Capacity:				
Contact:	Contact:	Contact:				

# Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

# Aug-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:					
Training Title:	Training Title:					
Capacity:	Capacity:					
Contact:	Contact:					

#### Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		

Contact:	Contact:	Contact:	Contact:	Contact:			
27	28	29	30				
Time:	Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:	Contact:				

#### Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time:		
				Training Title:		
				Capacity:		
				Contact:		
4	5	6	7	8	9	10
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
18	19		21	22	20	
		20			23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
25	26	27	28	29	30	31
Time:	Time:	Time:	Time:	Time:	30	31
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		

To register for tool training, the requester should:
a. complete the "Lab Safety Training" (Conducted by HSE Department)
b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
d. register in the Badger Booking System

#### NGS, SINGLE CELL & FACS / FACS BIOSCIENCE CORE LAB

#### INSTRUMENT TRAINING CALENDAR

#### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
10:00 qPCR Capacity: 3 NGSillumina@kaust.ed.usa		9:00 Library Preparation Capacity: 3 <u>NGSillumina@kaust.ed.usa</u>	9:00 Library Preparation Capacity: 3 NGSillumina@kaust.ed.usa			
10	11	12	13	14	15	16
	9:00 10x Genomics Capacity: 2 FACS@kaust.edu.sa			10:00 MiSeq training Capacity: 3 NGSillumina@kaust.ed.usa		
17	18	19	20	21	22	23
				10:00		
				Sequence Analisys Viewer - QC		
				Capacity: 5 NGSillumina@kaust.ed.usa		
24	25	26	27	28	29	30
		9:00 Library Preparation 3 NGSillumina@kaust.ed.usa	9:00 Library Preparation 3 NGSillumina@kaust.ed.usa			

#### Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
10:00 qPCR Capacity: 3 NGSillumina@kaust.ed.usa	9:00 10x Genomics Capacity: 2 <u>FACS@kaust.edu.sa</u>			10:00 MiSeq training Capacity: 3 NGSillumina@kaust.ed.usa		
8	9	10	11	12	13	14
8	9	10	11	10:00 Sequence Analisys Viewer - QC Capacity: 5 NGSillumina@kaust.ed.usa	13	14
15	16	17 9:00 Library Preparation	18 9:00 Library Preparation	19	20	21
		3 NGSillumina@kaust.ed.usa	3 NGSillumina@kaust.ed.usa			
22	9:00 10x Genomics Capacity: 2 FACS@kaust.edu.sa	24	25	26 10:00 MiSeq training Capacity: 3 NGSillumina@kaust.ed.usa	27	28
29	30	31				
10:00 qPCR Capacity: 3 NGSillumina@kaust.ed.usa	-					

#### Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
				10:00		
				Sequence Analisys Viewer - QC		
				Capacity: 5		
				NGSillumina@kaust.ed.usa		
	·	•	·	•	•	•
5	6	7	8	9	10	11

		9:00 Library Preparation 3 NGSillumina@kaust.ed.usa	9:00 Library Preparation 3 NGSillumina@kaust.ed.usa			
	l.					
12	13	14	15	16	17	18
	9:00			10:00		
	10x Genomics			MiSeq training		
	Capacity: 2			Capacity: 3		
	FACS@kaust.edu.sa			NGSillumina@kaust.ed.usa		
19	20	21	22	23	24	25
10:00				10:00		
qPCR				Sequence Analisys Viewer - QC		
Capacity: 3				Capacity: 5		
NGSillumina@kaust.ed.usa				NGSillumina@kaust.ed.usa		
·			•			
26	27	28	29	30	31	
9:00		9:00	9:00			
Introduction to NGS		Library Preparation	Library Preparation			
Capacity: 40		3	3			
NGSillumina@kaust.ed.usa		NGSillumina@kaust.ed.usa	NGSillumina@kaust.ed.usa			

#### Feb-20

2 3 4 5 6 7  9:00 10x Genomics Capacity: 2 FACS@kaust.edu.sa  9 10 11 12 13 14  9 10 11 12 13 14  9 10 0 11 1 12 13 14  10:00 Sequence Analisys Viewer - QC Capacity: 5 NGSillumina@kaust.ed usa  16 17 18 19 20 21  10:00 9:00 20 QPCR Library Preparation 3 NGSillumina@kaust.ed usa  NGSillumina@kaust.ed usa  NGSillumina@kaust.ed usa  NGSillumina@kaust.ed usa  NGSillumina@kaust.ed usa	Sun	Mon	Tue	Wed	Thu	Fri	Sat
10x Genomics   Capacity: 2   Capacity: 3   NGSillumina@kaust.ed.usa	2	3	4	5	6	7	8
Capacity: 2   Capacity: 3   NGSillumina@kaust.ed.usa   NGSillumina@kaust.ed.usa		9:00			10:00		
Page   Page		10x Genomics			MiSeq training		
9 10 11 12 13 14 10.00 Sequence Analisty Viewer - QC Capacity: 5 NGSillumina@kaust.ed.usa 16 17 18 19 20 21 10:00 qPCR Library Preparation Library Preparation Capacity: 3 NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa		Capacity: 2			Capacity: 3		
16		FACS@kaust.edu.sa			NGSillumina@kaust.ed.usa		
16				42			
Sequence Analisys Viewer - QC   Capacity: 5   NGSillumina@kaust.ed.usa	9	10	- 11	12		14	15
Capacity: 5   NGSillumina@kaust.ed.usa							
16							
16							
10:00 9:00 9:00 QPCR Library Preparation Library Preparation S 3 NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa			I.	l	NG Siliul I lili la (Qika ust. e u. usa		
qPCR     Library Preparation     Library Preparation       Capacity: 3     3       NGSillumina@kaust.ed.usa     NGSillumina@kaust.ed.usa   NGSillumina@kaust.ed.usa	16	17	18	19	20	21	22
Capacity: 3 3 3  NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa	10:00		9:00	9:00			
NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa			Library Preparation	Library Preparation			
	Capacity: 3		3	3			
23 24 25 26 27 28	NGSillumina@kaust.ed.usa		NGSillumina@kaust.ed.usa	NGSillumina@kaust.ed.usa			
23 24 25 26 27 28							
	23	24	25	26	27	28	29
	!						

# Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
8	9	10	11	12	13	14
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
15	16	17	18	19	20	21
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
				-		
29	30	31				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	_		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30		
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

# May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
31						
Time:						
Training Title:						
Capacity:						
Contact:						

# Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat			
	1	2	3	4	5	6			
	Time:	Time:	Time:	Time:					
	Training Title:	Training Title:	Training Title:	Training Title:					
	Capacity:	Capacity:	Capacity:	Capacity:					
	Contact:	Contact:	Contact:	Contact:					
7	8	9	10	11	12	13			
Time:	Time:	Time:	Time:	Time:					
Training Title:									
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:					
Contact:	Contact:	Contact:	Contact:	Contact:					
					-				
14	15	16	17	18	19	20			
Time:	Time:	Time:	Time:	Time:					
Training Title:									

Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
28	29	30				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

#### Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	-	8	q	10	11
9:00	Time:	Time:	Time:	Time:	10	
Introduction to NGS	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity: 40	Capacity:	Capacity:	Capacity:	Capacity:		
	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:		
NGSillumina@kaust.ed.usa	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	-					
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

# Aug-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:	·				
Training Title:	Training Title:	·				
Capacity:	Capacity:					
Contact:	Contact:					

Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
						1
27	28	29	30		_	
Time:	Time:	Time:	Time:			
Training Title:	Training Title:	Training Title:	Training Title:			
Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:			
Contact:	Contact:	Contact:	Contact:			

Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time:		
				Training Title:		
				Capacity:		
				Contact:		
4	5	6	7	8	9	10
Time:	Time:	Time:	Time:	Time:	,	- 10
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
COITEGE.	Contact.	Contact.	Contact.	Contact.		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
18	19	20	21	22	23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
25	26	27	28	29	30	31
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

To register for tool training, the requester should:
a. complete the "Lab Safety Training" (Conducted by HSE Department)
b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
d. register in the Badger Booking System

#### SANGER & THIRD GENERATION SEQUENCING BIOSCIENCE CORE LAB

#### INSTRUMENT TRAINING CALENDAR

#### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	•			•		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

#### Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time: 9am	Time:	Time:	Time:	Time:		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
8	9	10	11	12	13	14
Time: 2 pm	Time:	Time:	Time:	Time:	13	14
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
			-		-	
15	16	17	18	19	20	21
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Blue Pippin	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
22	Z3 Time:	Z4 Time:	Z5 Time:	Z6 Time:	21	∠8
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
29	30	31				
Time: 2 pm	Time:	Time:				
Training in Fragment Analyzer	Training Title:	Training Title:				
3	Capacity:	Capacity:				
tgs@kaust.edu.sa	Contact:	Contact:				

# Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Training Title: Capacity:	Time: Training Title: Capacity:		
			Contact:	Contact:		

Time: 9am   Time:   Time:   Time:   Time:   Time:   Training Title:   Capacity:	5	6	7	8	9	10	11
Electrophoresis   Training Inte:   Tra	Time: 9am	Time:	Time:	Time:	Time:		
Igs@kauste.edu.sa		Training Title:	Training Title:	Training Title:	Training Title:		
Time: 2 pm Training in Blue Pippin 3 1gs@kaust.edu.sa  12 13 14 15 16 17 18 Time: 2 pm Training Time: 2 pm Training Time: Training Title: Training Title: Training Title: Training Title: Capacity: Capacity: Capacity: Capacity: Contact: C	3	Capacity:	Capacity:	Capacity:	Capacity:		
Training in Blue Pippin   3   3   3   3   3   4   15   16   17   18	tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
12   13   14   15   16   17   18	Time: 2 pm						
12	Training in Blue Pippin						
12	3						
Time: 2 pm	tgs@kaust.edu.sa						
Time: 2 pm							
Training in Fragment Analyzer   September   Training Title:   Training Title:   Training Title:   Training Title:   Capacity:   Capacity						17	18
Capacity:   Capa							
tgs@kaust.edu.sa         Contact:         Time:         Time:         Time:         Time:         Time:         Time:         Time:         Training Title:         Training Title:         Training Title:         Training Title:         Training Title:         Contact:         Contact: <th< td=""><td>Training in Fragment Analyzer</td><td></td><td></td><td></td><td></td><td></td><td></td></th<>	Training in Fragment Analyzer						
19   20   21   22   23   24   25	3						
Time: 2 pm	tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm   Time:   Training Title:   Training Title:   Training Title:   Training Title:   Training Title:   Training Title:   Capacity:	- 12						
Training in Blue Pippin Training Title: Capacity: Capacity: Capacity: Capacity: Capacity: Contact:  26 27 28 29 30 31  Time: 2pm Time: Time: Time: Time: Time: Time: Time: Time: Training in Fragment Analyzer Training Title: Capacity: Capacit						24	25
3         Capacity: tys@kaust.edu.sa         Capacity: Contact:         Capacity: Contact:         Capacity: Contact:         Capacity: Contact:           26         27         28         29         30         31           Time: 2 pm Training in Fragment Analyzer         Time: Training Title: Training Title: Training Title: Training Title: Capacity: Capacity: Capacity: Capacity: Capacity: Capacity:         Training Title: Capacity: Capacity: Capacity: Capacity: Capacity: Capacity:							
tgs@kaust.edu.sa         Contact:         Contact:         Contact:         Contact:           26         27         28         29         30         31           Time: 2 pm         Time:         Time:         Time:         Time:           Training in Fragment Analyzer         Training Title:         Training Title:         Training Title:         Training Title:           3         Capacity:         Capacity:         Capacity:         Capacity:	Training in Blue Pippin						
26         27         28         29         30         31           Time: 2 pm         Time: Time: Time: Time: Time: Training Title: Tr	3						
Time: 2 pm Time: Time: Time: Time: Time: Training in Fragment Analyzer Training Title: Time:	tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm Time: Time: Time: Time: Time: Training Title: Train	26	27	20	20	20	24	
Training in Fragment Analyzer Training Title:						31	
3 Capacity: Capacity: Capacity: Capacity:							
	rranning in rrayment Analyzer						
	tas@kaust.edu.sa	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:		

# Feb-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time: 9am	Time:	Time:	Time:	Time:		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
9	10	11	12	13	14	15
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Blue Pippin	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time: 2 pm	Time:	Z5 Time:	Z6 Time:	Time:	∠8	29
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
rraining in rragment Analyzer	Capacity:	Capacity:	Capacity:	Capacity:		
4	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		

# Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time: 9am	Time:	Time:	Time:	Time:		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
8	9	10	11	12	13	14
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
15	16	17	18	19	20	21
Time: 2 pm	Time:	Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
Training in Blue Pippin	Training Title:					
Training in Blue Pippin 3	Capacity:	Capacity:	Capacity:	Capacity:		
Training in Blue Pippin 3 tgs@kaust.edu.sa			Capacity: Contact:	Capacity: Contact:		
3	Capacity:	Capacity:			27	28

Time: 2 pm	Time:	Time:	Time:	Time:	
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:	
3	Capacity:	Capacity:	Capacity:	Capacity:	
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:	
29	30	31			
Time:	Time:	Time:			
Training Title:	Training Title:	Training Title:			
Capacity:	Capacity:	Capacity:			
Contact:	Contact:	Contact:			

# Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:			
			Contact:	Contact:		
5	6	7	8	q	10	11
Time: 9am	Time:	Time:	Time:	Time:	10	- 11
	Time.	Time.	Time.	Time.		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
iga@kadat.edd.aa		l.				
12	13	14	15	16	17	18
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
			22	23		
					24	25
19	20	21				
Time: 2 pm	Time:	Time:	Time:	Time:		
	Time: Training Title:	Time: Training Title:	Time: Training Title:	Time: Training Title:		
Time: 2 pm Training in Blue Pippin 3	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:		
Time: 2 pm	Time: Training Title:	Time: Training Title:	Time: Training Title:	Time: Training Title:		
Time: 2 pm Training in Blue Pippin 3	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:		
Time: 2 pm Training in Blue Pippin 3 tgs@kaust.edu.sa	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:		
Time: 2 pm Training in Blue Pippin 3 3 tgs@kaust.edu.sa  26 Time: 2 pm	Time: Training Title: Capacity: Contact: 27 Time:	Time: Training Title: Capacity: Contact:  28 Time:	Time: Training Title: Capacity: Contact:  29 Time:	Time: Training Title: Capacity: Contact:  30 Time:		
Time: 2 pm Training in Blue Pippin 3 tgs@kaust.edu.sa	Time: Training Title: Capacity: Contact: 27	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact: 30		

# May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time: 9am	Time:	Time:	Time:	Time:		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
10	11	12	13	14	15	16
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time: 2 pm	Time:	Time:	Time:	Time:	22	23
Training in Blue Pippin	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tos@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
igotanadot.cod.od						
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
31						
Time:						
Training Title:						
Capacity:						
Contact:		,	"			

Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
	Time:	Time:	Time:	Time:		
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
7	8	9	10	11	12	13
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
14	15	16	17	18	19	20
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
28	29	30				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	•			•	•	
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

Aug-20

Sat	Fri	Thu	Wed	Tue	Mon	Sun
8	7	6	5	4	3	2
		Time:	Time:	Time:	Time:	Time:
		Training Title:				
		Capacity:	Capacity:	Capacity:	Capacity:	Capacity:
		Contact:	Contact:	Contact:	Contact:	Contact:
15	14	13	12	11	10	9
		Time:	Time:	Time:	Time:	Time:
		Training Title:				
		Capacity:	Capacity:	Capacity:	Capacity:	Capacity:
		Contact:	Contact:	Contact:	Contact:	Contact:
22	21	20	19	18	17	16
		Time:	Time:	Time:	Time:	Time:
		Training Title:				
		Capacity:	Capacity:	Capacity:	Capacity:	Capacity:
		Contact:	Contact:	Contact:	Contact:	Contact:

23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:					
Training Title:	Training Title:					
Capacity:	Capacity:					
Contact:	Contact:	,				

#### Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
27	28	29	30			
Time:	Time:	Time:	Time:			
Training Title:	Training Title:	Training Title:	Training Title:			
Capacity:	Capacity:	Capacity:	Capacity:			
Contact:	Contact:	Contact:	Contact:			

#### Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time:		
				Training Title:		
				Capacity:		
				Contact:		
4	5	6	7	8	9	10
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
18	19	20	21	22	23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
25	26	27	28	29	30	31
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

To register for tool training, the requester should:
a. complete the "Lab Safety Training" (Conducted by HSE Department)
b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)

c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department) d. register in the Badger Booking System

# PROTEOMICS BIOSCIENCE CORE LAB

# INSTRUMENT TRAINING CALENDAR

#### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for peptide analysis		
Capacity: 4	Capacity: 4		Capacity: 4	Capacity: 4		
Contact: Huma Khurram	Contact: Huma Khurram		Contact: Huma Khurram	Contact: Huoming Zhang		
			<u> </u>			
10	11 10:00	12	13	14	15	16
	Floid cell imaging					
	Capacity: 4					
	Contact: Kosuke Sakashita					
	Time: 11:00	9:00				
	Training Title: Ultracentrifuge	Protein expression & purification				
	Capacity: 4	Capacity: 4				
	Contact: Kosuke Sakashita	Contact: Kosuke Sakashita				
	13:00					
	Spectramax Plate reader Capacity: 4					
	Contact: Kosuke Sakashita					
	14:00	-				
	Monolith NT.115Pico					
	Capacity: 4					
	Contact: Kosuke Sakashita					
17	18	19	20	21	22	23
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for intact protein analysis		
Capacity: 4 Contact: Huma Khurram	Capacity: 4 Contact: Huoming Zhang		Capacity: 4 Contact: Huma Khurram	Capacity: 4 Contact: Huma Khurram		
CONTACT. Fluing Knuffdff	Contact. Fluoring Zriang	1	Contact. Fluina Kriunalli	Contact. Fluma Kriundili		
24	25	26	27	28	29	30
	10:00					
	Floid cell imaging					
1	Capacity: 4	1		1		

	Contact: Kosuke Sakashita	
ı	Time: 11:00	9:00
	Training Title: Ultracentrifuge	Biacore T200
	Capacity: 4	Capacity: 4
	Contact: Kosuke Sakashita	Contact: Kosuke Sakashita
	13:00	
	Spectramax Plate reader	
	Capacity: 4	
	Contact: Kosuke Sakashita	
	14:00	
	Monolith NT.115Pico	
	Capacity: 4	
	Contact: Kosuke Sakashita	

# Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for peptide analysis		
Capacity: 4	Capacity: 4		Capacity: 4	Capacity: 4		
Contact: Huma Khurram	Contact: Huma Khurram		Contact: Huma Khurram	Contact: Huoming Zhang		
	•					
8	9	10	11	12	13	14
	10:00					
	Floid cell imaging					
	Capacity: 4					
	Contact: Kosuke Sakashita					
	Time: 11:00	9:00				
	Training Title: Ultracentrifuge	Protein expression & purification				
	Capacity: 4	Capacity: 4				
	Contact: Kosuke Sakashita	Contact: Kosuke Sakashita				
	13:00	<u>oomasii Hooano Ganasiina</u>				
	Spectramax Plate reader					
	Capacity: 4					
	Contact: Kosuke Sakashita					
	14:00					
	Monolith NT.115Pico					
	Capacity: 4					
	Contact: Kosuke Sakashita					
			-			
15	16	17	18	19	20	21
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for intact protein analysis		
Capacity: 4	Capacity: 4		Capacity: 4	Capacity: 4		
Contact: Huma Khurram	Contact: Huoming Zhang		Contact: Huma Khurram	Contact: Huma Khurram		
		1				
22	23	24	25	26	27	28
		-				
1	10:00	]				

	Floid cell imaging Capacity: 4 Contact: Kosuke Sakashita Time: 11:00  Training Title: Ultracentrifuge Capacity: 4 Contact: Kosuke Sakashita 13:00  Spectramax Plate reader Capacity: 4 Contact: Kosuke Sakashita 14:00  Monolith NT.115Pico Capacity: 4 Contact: Kosuke Sakashita	9:00 Biacore T200 Capacity: 4 Contact: Kosuke Sakashita		
29	30	31		

# BIOINFORMATICS BIOSCIENCE CORE LAB

# **INSTRUMENT TRAINING CALEND.**

# **Nov-19**

Sun	Mon	Tue	Wed
3	4	5	6
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
		•	
10	11	12	13
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
17	18	19	20
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
		•	
24	25	26	27
Time:	Time:	Time:	14:00-16:00

Training Title:	Training Title:	Training Title:	BCL Bioinformatics clinic
Capacity:	Capacity:	Capacity:	3
Contact:	Contact:	Contact:	yoshinori.fukasawa@kaust.edu.sa

# Dec-19

Sun	Mon	Tue	Wed
1	2	3	4
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
8	9	10	11
Time:	Time:	Time:	14:00-16:00
Training Title:	Training Title:	Training Title:	BCL Bioinformatics clinic
Capacity:	Capacity:	Capacity:	3
Contact:	Contact:	Contact:	yoshinori.fukasawa@kaust.edu.sa
15	16	17	18
Time:	Time:	Time:	Time:
Time: Training Title:	Time: Training Title:	Time: Training Title:	Time: Training Title:
Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:
Time: Training Title:	Time: Training Title:	Time: Training Title:	Time: Training Title:
Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:
Time: Training Title: Capacity: Contact:			
Time: Training Title: Capacity: Contact:  22 Time:	Time: Training Title: Capacity: Contact:  23 Time:	Time: Training Title: Capacity: Contact:  24 Time:	Time: Training Title: Capacity: Contact:  25 14:00-16:00
Time: Training Title: Capacity: Contact:  22 Time: Training Title:	Time: Training Title: Capacity: Contact:  23 Time: Training Title:	Time: Training Title: Capacity: Contact:  24 Time: Training Title:	Time: Training Title: Capacity: Contact:  25 14:00-16:00 BCL Bioinformatics clinic
Time: Training Title: Capacity: Contact:  22 Time:	Time: Training Title: Capacity: Contact:  23 Time:	Time: Training Title: Capacity: Contact:  24 Time:	Time: Training Title: Capacity: Contact:  25 14:00-16:00
Time: Training Title: Capacity: Contact:  22 Time: Training Title:	Time: Training Title: Capacity: Contact:  23 Time: Training Title:	Time: Training Title: Capacity: Contact:  24 Time: Training Title:	Time: Training Title: Capacity: Contact:  25 14:00-16:00 BCL Bioinformatics clinic
Time: Training Title: Capacity: Contact:  22 Time: Training Title: Capacity:	Time: Training Title: Capacity: Contact:  23 Time: Training Title: Capacity:	Time: Training Title: Capacity: Contact:  24 Time: Training Title: Capacity:	Time: Training Title: Capacity: Contact:  25  14:00-16:00 BCL Bioinformatics clinic 3

Time:	Time:	Time:	
Training Title:	Training Title:	Training Title:	
Capacity:	Capacity:	Capacity:	
Contact:	Contact:	Contact:	

# Jan-20

Sun	Mon	Tue	Wed
			1
			Time:
			Training Title:
			Capacity:
			Contact:
	_	_	•
5	6	7	8
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
12	13	14	15
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
	1		
19	20	21	22
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
	1		
26	27	28	29
Time:	Time:	Time:	Time:

Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

# Feb-20

Sun	Mon	Tue	Wed
2	3	4	5
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
9	10	11	12
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
			-
16	17	18	19
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
23	24	25	26
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

Sun	Mon	Tue	Wed
1	2	3	4
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
8	9	10	11
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
15	16	17	18
Time:	Time:	Time:	9:30-11:00
Training Title:	Training Title:	Training Title:	Practical Basic Linux for Biologists
Capacity:	Capacity:	Capacity:	40
Contact:	Contact:	Contact:	issaac.rajan@kaust.edu.sa
22	23	24	25
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
29	30	31	
Time:	Time:	Time:	
Training Title:	Training Title:	Training Title:	
Capacity:	Capacity:	Capacity:	
Contact:	Contact:	Contact:	

# Apr-20

Sun	Mon	Tue	Wed
			1

			Time: Training Title: Capacity: Contact:
5	6	7	8
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
12	13	14	15
Time:	Time:	Time:	9:30-10:30
Training Title:	Training Title:	Training Title:	duction to FastQC and its interpreta
Capacity:	Capacity:	Capacity:	40
Contact:	Contact:	Contact:	issaac.rajan@kaust.edu.sa
19	20	21	22
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
	•		•
26	27	28	29
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

# May-20

Sun	Mon	Tue	Wed
3	4	5	6
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:

Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
10	11	12	13
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
17	18	19	20
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
24	25	26	27
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
31			
Time:			
Training Title:			
Capacity:			
Contact:			

# Jun-20

Sun	Mon	Tue	Wed
	1	2	3
	Time:	Time:	Time:
	Training Title:	Training Title:	Training Title:
	Capacity:	Capacity:	Capacity:

	Contact:	Contact:	Contact:
7	8	9	10
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
14	15	16	17
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
	•		
21	22	23	24
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
28	29	30	
Time:	Time:	Time:	
Training Title:	Training Title:	Training Title:	
Capacity:	Capacity:	Capacity:	
Contact:	Contact:	Contact:	

## Jul-20

Sun	Mon	Tue	Wed
			1
			Time:
			Training Title: Capacity: Contact:
			Capacity:
			Contact:

5	6	7	8
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
12	13	14	15
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
19	20	21	22
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
			-
26	27	28	29
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

## Aug-20

Sun	Mon	Tue	Wed
2	3	4	5
Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:
Contact:	Contact:	Contact:	Contact:
9	10	11	12
Time:	Time:	Time:	Time:

| Training Title: Capacity: Contact: |
|------------------------------------|------------------------------------|------------------------------------|------------------------------------|
| - Comaca:                          | Comada                             | Comaca                             | oon.aoa                            |
| 16                                 | 17                                 | 18                                 | 19                                 |
| Time:                              | Time:                              | Time:                              | Time:                              |
| Training Title:                    | Training Title:                    | Training Title:                    | Training Title:                    |
| Capacity:                          | Capacity:                          | Capacity:                          | Capacity:                          |
| Contact:                           | Contact:                           | Contact:                           | Contact:                           |
|                                    |                                    |                                    |                                    |
| 23                                 | 24                                 | 25                                 | 26                                 |
| Time:                              | Time:                              | Time:                              | Time:                              |
| Training Title:                    | Training Title:                    | Training Title:                    | Training Title:                    |
| Capacity:                          | Capacity:                          | Capacity:                          | Capacity:                          |
| Contact:                           | Contact:                           | Contact:                           | Contact:                           |
|                                    |                                    |                                    |                                    |
| 30                                 | 31                                 |                                    |                                    |
| Time:                              | Time:                              |                                    |                                    |
| Training Title:                    | Training Title:                    |                                    |                                    |
| Capacity:                          | Capacity:                          |                                    |                                    |
| Contact:                           | Contact:                           |                                    |                                    |

## Sep-20

Sun	Mon	Tue	Wed	
		1	2	
		Time:	Time:	
		Training Title:	Training Title:	
		Capacity:	Capacity:	
		Contact:	Contact:	
6	7	8	9	
Time:	Time:	Time:	Time:	
Training Title:	Training Title:	Training Title:	Training Title:	

Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
13	14	15	16
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
20	21	22	23
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
27	28	29	30
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

## Oct-20

Sun	Mon	Tue	Wed
4	5	6	7
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:

Contact:	Contact:	Contact:	Contact:
11	12	13	14
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
18	19	20	21
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
25	26	27	28
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

## To register for tool training, the requester should:

- a. complete the "Lab Safety Training" (Conducted by HSE Department)
- b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
- c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
- d. register in the Badger Booking System

# AR

Thu	Fri	Sat
7	8	9
Time:		
Training Title:		
Capacity:		
Contact:		
14	15	16
Time:		
Training Title:		
Capacity:		
Contact:		
21	22	23
Time:		
Training Title:		
Capacity:		
Contact:		
28	29	30
Time:		

Training Title:	
Capacity:	
Contact:	

Thu	Fri	Sat
5	6	7
Time:		
Training Title:		
Capacity:		
Contact:		
12	13	14
Time:		
Training Title:		
Capacity:		
Contact:		
Contact.		
19	20	21
Time:		
Training Title:		
Capacity:		
Contact:		
26	27	28
Time:		
Training Title:		
Capacity:		
Contact:		
		T .

Thu	Fri	Sat
2	3	4
Time:		
Training Title:		
Capacity:		
Contact:		
9	10	11
Time:		
Training Title:		
Capacity:		
Contact:		
16	17	18
Time:	17	18
Time: Training Title:	17	18
Time: Training Title: Capacity:	17	18
Time: Training Title:	17	18
Time: Training Title: Capacity: Contact:		
Time: Training Title: Capacity: Contact:	24	18 25
Time: Training Title: Capacity: Contact:  23 Time:		
Time: Training Title: Capacity: Contact:  23 Time: Training Title:		
Time: Training Title: Capacity: Contact:  23 Time: Training Title: Capacity:		
Time: Training Title: Capacity: Contact:  23 Time: Training Title:		
Time: Training Title: Capacity: Contact:  23 Time: Training Title: Capacity: Contact:	24	
Time: Training Title: Capacity: Contact:  23 Time: Training Title: Capacity:		

Training Title: Capacity:	
Contact:	

T1	F ·	0.1
Thu	Fri	Sat
6	7	8
Time:		
Training Title:		
Capacity:		
Contact:		
13	14	15
Time:		
Training Title:		
Capacity:		
Contact:		
	•	
20	21	22
Time:		
Training Title:		
Capacity:		
Contact:		
27	28	29
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
5	6	7
Time: Training Title: Capacity: Contact:		
12	13	14
Time: Training Title: Capacity: Contact:		
19	20	21
Time: Training Title: Capacity: Contact:		
26	27	28
Time: Training Title: Capacity: Contact:		

Thu	Fri	Sat
2	3	4

Time: Training Title: Contact:		
9	10	11
Time: Training Title: Capacity: Contact:		
16	17	18
Time: Training Title: Capacity: Contact:		
23	24	25
Time: Training Title: Capacity: Contact:		
30		
Time: Training Title: Capacity: Contact:		

Thu	Fri	Sat
7	8	9
Time:		
Training Title:		

Capacity: Contact:		
Contact.		
14	15	16
Time:		
Training Title:		
Capacity:		
Contact:		
21	22	23
Time:		
Training Title:		
Capacity:		
Contact:		
28	29	30
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
4	5	6
Time:		
Training Title:		
Training Title: Capacity:		

Contact:		
11	12	13
Time:		
Training Title:		
Capacity:		
Contact:		
	10	
18	19	20
Time:		
Training Title:		
Capacity:		
Contact:		
25	26	27
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
2	3	4
Time:		
Training Title:		
Capacity:		
Training Title: Capacity: Contact:		

9	10	11
Time:		
Training Title:		
Capacity:		
Contact:		
16	17	18
Time:		
Training Title:		
Capacity:		
Contact:		
23	24	25
Time:		
Training Title:		
Capacity:		
Contact:		
30	31	
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
6	7	8
Time: Training Title: Capacity: Contact:		
13	14	15
Time:		

Training Title: Capacity: Contact:		
20	21	22
Time: Training Title: Capacity: Contact:		
27	28	29
Time: Training Title: Capacity: Contact:	20	2.9

Thu	Fri	Sat
3	4	5
Time: Training Title: Capacity: Contact:		
10	11	12
Time: Training Title:		

Capacity: Contact:		
17	18	19
Time: Training Title: Capacity: Contact:		
24	25	26
Time: Training Title: Capacity: Contact:		

Thu	Fri	Sat
1	2	3
Time: Training Title: Capacity: Contact:		
8	9	10
Time: Training Title: Capacity:	3	10

Contact:		
15	16	17
Time:		
Training Title:		
Capacity:		
Contact:		
22	23	24
Time:		
Training Title:		
Capacity:		
Contact:		
29	30	31
Time:		
Training Title:		
Capacity:		
Contact:		

#### NGS, SINGLE CELL & FACS / FACS BIOSCIENCE CORE LAB

## INSTRUMENT TRAINING CALENDAR

#### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
		9:30	9:30			
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
	·	·	·	·		
10	11	12	13	14	15	16
17	18	19	20	21	22	23
		14:00	14:00			
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
24	25	26	27	28	29	30

#### Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
		9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa			
-						
8	9	10	11	12	13	14
15	16	17	18	19	20	21
	.0	14:00 Flow Cytometry Capacity: 3 <u>FACS@kaust.ed.usa</u>	14:00 Flow Cytometry Capacity: 3 <u>FACS@kaust.ed.usa</u>		10	
22	23	24	25	26	27	28
29	30	31				
		9:30 Flow Cytometry Capacity: 3 <u>FACS@kaust.ed.usa</u>				

#### Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
Ouri	INIOII	Tue	4	2		
			9:30	2	3	4
			Flow Cytometry			
			Capacity: 3			
			FACS@kaust.ed.usa			
_		_	-			
5	6	7	8	9	10	11
	l			l		
12	13	14	15	16	17	18
12	13	14:00	14:00	16		10
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
19	20	21	22	23	24	25
	I .			1		
26	27	28	29	30	31	
30		9:30	9:30	-5		
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
	The state of the s	i Acolwiaust.eu.usa	i Acojwaust.eu.usa			

#### Feb-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
9	10	11	12	13	14	15
9	10	14:00 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	14:00 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
23	24	9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	21	20	29

### Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

8	9	10	11	12	13	14
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
15	16	17	18	19	20	21
Time:	Time:	Time:	Time:	Time:	20	
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
Contact.	contact.	Contact.	Contact.	Contact.		
29	30	31				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

## Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	_		
			Contact:	Contact:		
	•		=	•	•	•
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30		
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

## May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
,						
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
31						
Time:						
Training Title:						
Capacity:						
Contact:						

### Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
	Time:	Time:	Time:	Time:		
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
7	8	9	10	11	12	13
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
14	15	16	17	18	19	20
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
28	29	30				
Time:	Z9 Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity: Contact:	Capacity: Contact:	Capacity:				
Contact:	Contact:	Contact:				

## Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

## Aug-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:					
Training Title:	Training Title:					
Capacity:	Capacity:					
Contact:	Contact:					

### Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		

Contact:	Contact:	Contact:	Contact:	Contact:	
27	28	29	30		
Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:		

#### Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time:		
				Training Title:		
				Capacity:		
				Contact:		
4	5	6	7	8	9	10
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
18	19		21	22	20	
		20			23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
25	26	27	28	29	30	31
Time:	Time:	Time:	Time:	Time:	30	31
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		

To register for tool training, the requester should:
a. complete the "Lab Safety Training" (Conducted by HSE Department)
b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
d. register in the Badger Booking System

#### NGS, SINGLE CELL & FACS / FACS BIOSCIENCE CORE LAB

#### INSTRUMENT TRAINING CALENDAR

#### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
10:00 qPCR Capacity: 3 NGSillumina@kaust.ed.usa		9:00 Library Preparation Capacity: 3 <u>NGSillumina@kaust.ed.usa</u>	9:00 Library Preparation Capacity: 3 NGSillumina@kaust.ed.usa			
10	11	12	13	14	15	16
	9:00 10x Genomics Capacity: 2 FACS@kaust.edu.sa			10:00 MiSeq training Capacity: 3 NGSillumina@kaust.ed.usa		
17	18	19	20	21	22	23
				10:00		
				Sequence Analisys Viewer - QC		
				Capacity: 5 NGSillumina@kaust.ed.usa		
24	25	26	27	28	29	30
		9:00 Library Preparation 3 NGSillumina@kaust.ed.usa	9:00 Library Preparation 3 NGSillumina@kaust.ed.usa			

### Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
10:00 qPCR Capacity: 3 NGSillumina@kaust.ed.usa	9:00 10x Genomics Capacity: 2 <u>FACS@kaust.edu.sa</u>			10:00 MiSeq training Capacity: 3 NGSillumina@kaust.ed.usa		
8	9	10	11	12	13	14
8	9	10	11	10:00 Sequence Analisys Viewer - QC Capacity: 5 NGSillumina@kaust.ed.usa	13	14
15	16	17 9:00 Library Preparation	18 9:00 Library Preparation	19	20	21
		3 NGSillumina@kaust.ed.usa	3 NGSillumina@kaust.ed.usa			
22	9:00 10x Genomics Capacity: 2 FACS@kaust.edu.sa	24	25	26 10:00 MiSeq training Capacity: 3 NGSillumina@kaust.ed.usa	27	28
29	30	31				
10:00 qPCR Capacity: 3 NGSillumina@kaust.ed.usa	-					

#### Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat		
			1	2	3	4		
				10:00				
				Sequence Analisys Viewer - QC				
				Capacity: 5				
				NGSillumina@kaust.ed.usa				
5	6	7	8	9	10	11		

		9:00 Library Preparation 3 NGSillumina@kaust.ed.usa	9:00 Library Preparation 3 NGSillumina@kaust.ed.usa			
	l.					
12	13	14	15	16	17	18
	9:00			10:00		
	10x Genomics			MiSeq training		
	Capacity: 2			Capacity: 3		
	FACS@kaust.edu.sa			NGSillumina@kaust.ed.usa		
19	20	21	22	23	24	25
10:00				10:00		
qPCR				Sequence Analisys Viewer - QC		
Capacity: 3				Capacity: 5		
NGSillumina@kaust.ed.usa				NGSillumina@kaust.ed.usa		
·			•			
26	27	28	29	30	31	
9:00	· · · · · · · · · · · · · · · · · · ·	9:00	9:00			
Introduction to NGS		Library Preparation	Library Preparation			
Capacity: 40		3	3			
NGSillumina@kaust.ed.usa		NGSillumina@kaust.ed.usa	NGSillumina@kaust.ed.usa			

#### Feb-20

2 3 4 5 6 7  9:00 10x Genomics Capacity: 2 FACS@kaust.edu.sa  9 10 11 12 13 14  9 10 11 12 13 14  9 10 0 11 1 12 13 14  10:00 Sequence Analisys Viewer - QC Capacity: 5 NGSillumina@kaust.ed usa  16 17 18 19 20 21  10:00 9:00 20 QPCR Library Preparation 3 NGSillumina@kaust.ed usa  NGSillumina@kaust.ed usa  NGSillumina@kaust.ed usa  NGSillumina@kaust.ed usa  NGSillumina@kaust.ed usa	Sun	Mon	Tue	Wed	Thu	Fri	Sat
10x Genomics   Capacity: 2   Capacity: 3   NGSillumina@kaust.ed.usa	2	3	4	5	6	7	8
Capacity: 2   Capacity: 3   NGSillumina@kaust.ed.usa   NGSillumina@kaust.ed.usa		9:00			10:00		
Page   Page		10x Genomics			MiSeq training		
9 10 11 12 13 14 10.00 Sequence Analisty Viewer - QC Capacity: 5 NGSillumina@kaust.ed.usa 16 17 18 19 20 21 10:00 qPCR Library Preparation Library Preparation Capacity: 3 NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa		Capacity: 2			Capacity: 3		
16		FACS@kaust.edu.sa			NGSillumina@kaust.ed.usa		
16				42			
Sequence Analisys Viewer - QC   Capacity: 5   NGSillumina@kaust.ed.usa	9	10	- 11	12		14	15
Capacity: 5   NGSillumina@kaust.ed.usa							
16							
16							
10:00 9:00 9:00 QPCR Library Preparation Library Preparation S 3 NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa			I.	l	NG Siliul I lili la (Qika ust. e u. usa		
qPCR     Library Preparation     Library Preparation       Capacity: 3     3       NGSillumina@kaust.ed.usa     NGSillumina@kaust.ed.usa   NGSillumina@kaust.ed.usa	16	17	18	19	20	21	22
Capacity: 3 3 3  NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa	10:00		9:00	9:00			
NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa NGSillumina@kaust.ed.usa			Library Preparation	Library Preparation			
	Capacity: 3		3	3			
23 24 25 26 27 28	NGSillumina@kaust.ed.usa		NGSillumina@kaust.ed.usa	NGSillumina@kaust.ed.usa			
23 24 25 26 27 28							
	23	24	25	26	27	28	29
	!						

## Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
8	9	10	11	12	13	14
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
15	16	17	18	19	20	21
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
				-		
29	30	31				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	_		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30		
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

## May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
31						
Time:						
Training Title:						
Capacity:		·				
Contact:						

## Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat			
	1	2	3	4	5	6			
	Time:	Time:	Time:	Time:					
	Training Title:	Training Title:	Training Title:	Training Title:					
	Capacity:	Capacity:	Capacity:	Capacity:					
	Contact:	Contact:	Contact:	Contact:					
7	8	9	10	11	12	13			
Time:	Time:	Time:	Time:	Time:					
Training Title:									
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:					
Contact:	Contact:	Contact:	Contact:	Contact:					
14	15	16	17	18	19	20			
Time:	Time:	Time:	Time:	Time:					
Training Title:									

Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
28	29	30				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

### Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	-	8	q	10	11
9:00	Time:	Time:	Time:	Time:	10	
Introduction to NGS	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity: 40	Capacity:	Capacity:	Capacity:	Capacity:		
	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:		
NGSillumina@kaust.ed.usa	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	-					
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

## Aug-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:					
Training Title:	Training Title:					
Capacity:	Capacity:					
Contact:	Contact:			,		

Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
						1
27	28	29	30		_	
Time:	Time:	Time:	Time:			
Training Title:	Training Title:	Training Title:	Training Title:			
Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:			
Contact:	Contact:	Contact:	Contact:			

Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time:		
				Training Title:		
				Capacity:		
				Contact:		
4	5	6	7	8	9	10
Time:	Time:	Time:	Time:	Time:	,	- 10
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
COITEGE.	Contact.	Contact.	Contact.	Contact.		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
18	19	20	21	22	23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
25	26	27	28	29	30	31
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

To register for tool training, the requester should:
a. complete the "Lab Safety Training" (Conducted by HSE Department)
b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
d. register in the Badger Booking System

#### SANGER & THIRD GENERATION SEQUENCING BIOSCIENCE CORE LAB

#### INSTRUMENT TRAINING CALENDAR

#### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	•			•		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

#### Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time: 9am	Time:	Time:	Time:	Time:		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa	l					
8	9	10	11	12	13	14
Time: 2 pm	Time:	Time:	Time:	Time:	13	14
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
			-		-	
15	16	17	18	19	20	21
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Blue Pippin	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
22	Z3 Time:	Z4 Time:	Z5 Time:	Z6 Time:	21	∠8
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
29	30	31				
Time: 2 pm	Time:	Time:				
Training in Fragment Analyzer	Training Title:	Training Title:				
3	Capacity:	Capacity:				
tgs@kaust.edu.sa	Contact:	Contact:				

## Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Training Title: Capacity:	Time: Training Title: Capacity:		
			Contact:	Contact:		

Time: 9am   Time:   Time:   Time:   Time:   Time:   Training Title:   Capacity:	5	6	7	8	9	10	11
Electrophoresis   Training Inte:   Tra	Time: 9am	Time:	Time:	Time:	Time:		
Igs@kauste.edu.sa		Training Title:	Training Title:	Training Title:	Training Title:		
Time: 2 pm Training in Blue Pippin 3 1gs@kaust.edu.sa  12 13 14 15 16 17 18 Time: 2 pm Training Time: 2 pm Training Time: Training Title: Training Title: Training Title: Training Title: Capacity: Capacity: Capacity: Capacity: Contact: C	3	Capacity:	Capacity:	Capacity:	Capacity:		
Training in Blue Pippin   3   3   3   3   3   4   15   16   17   18	tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
12   13   14   15   16   17   18	Time: 2 pm						
12	Training in Blue Pippin						
12	3						
Time: 2 pm	tgs@kaust.edu.sa						
Time: 2 pm							
Training in Fragment Analyzer   September   Training Title:   Training Title:   Training Title:   Training Title:   Capacity:   Capacity						17	18
Capacity:   Capa							
tgs@kaust.edu.sa         Contact:         Time:         Time:         Time:         Time:         Time:         Time:         Time:         Training Title:         Training Title:         Training Title:         Training Title:         Training Title:         Contact:         Contact: <th< td=""><td>Training in Fragment Analyzer</td><td></td><td></td><td></td><td></td><td></td><td></td></th<>	Training in Fragment Analyzer						
19   20   21   22   23   24   25	3						
Time: 2 pm	tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm   Time:   Training Title:   Training Title:   Training Title:   Training Title:   Training Title:   Training Title:   Capacity:	- 12						
Training in Blue Pippin Training Title: Capacity: Capacity: Capacity: Capacity: Capacity: Contact:  26 27 28 29 30 31  Time: 2pm Time: Time: Time: Time: Time: Time: Time: Time: Training in Fragment Analyzer Training Title:						24	25
3         Capacity: tys@kaust.edu.sa         Capacity: Contact:         Capacity: Contact:         Capacity: Contact:         Capacity: Contact:           26         27         28         29         30         31           Time: 2 pm Training in Fragment Analyzer         Time: Training Title: Training Title: Training Title: Training Title: Capacity: Capacity: Capacity: Capacity: Capacity: Capacity: Capacity:         Training Title: Capacity: Capacity: Capacity: Capacity: Capacity: Capacity:							
tgs@kaust.edu.sa         Contact:         Contact:         Contact:         Contact:           26         27         28         29         30         31           Time: 2 pm         Time:         Time:         Time:         Time:           Training in Fragment Analyzer         Training Title:         Training Title:         Training Title:         Training Title:           3         Capacity:         Capacity:         Capacity:         Capacity:	Training in Blue Pippin						
26         27         28         29         30         31           Time: 2 pm         Time: Time: Time: Time: Time: Time: Training Title: Training Tit	3						
Time: 2 pm Time: Time: Time: Time: Time: Training in Fragment Analyzer Training Title: Time:	tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm Time: Time: Time: Time: Time: Training Title: Train	26	27	20	20	20	24	
Training in Fragment Analyzer Training Title:						31	
3 Capacity: Capacity: Capacity: Capacity:							
	rranning in rrayment Analyzer						
	tas@kaust.edu.sa	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:		

## Feb-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time: 9am	Time:	Time:	Time:	Time:		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
9	10	11	12	13	14	15
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Blue Pippin	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time: 2 pm	Time:	Z5 Time:	Z6 Time:	Time:	∠8	29
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
rraining in rragment Analyzer	Capacity:	Capacity:	Capacity:	Capacity:		
4	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		

## Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time: 9am	Time:	Time:	Time:	Time:		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
8	9	10	11	12	13	14
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
15	16	17	18	19	20	21
Time: 2 pm	Time:	Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
Training in Blue Pippin	Training Title:					
Training in Blue Pippin 3	Capacity:	Capacity:	Capacity:	Capacity:		
Training in Blue Pippin 3 tgs@kaust.edu.sa			Capacity: Contact:	Capacity: Contact:		
3	Capacity:	Capacity:			27	28

Time: 2 pm	Time:	Time:	Time:	Time:	
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:	
3	Capacity:	Capacity:	Capacity:	Capacity:	
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:	
29	30	31			
Time:	Time:	Time:			
Training Title:	Training Title:	Training Title:			
Capacity:	Capacity:	Capacity:			
Contact:	Contact:	Contact:			

## Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:			
			Contact:	Contact:		
5	6	7	8	q	10	11
Time: 9am	Time:	Time:	Time:	Time:	10	- 11
	Time.	Time.	Time.	Time.		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
iga@kadat.edd.aa		l.				
12	13	14	15	16	17	18
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
			22	23		
					24	25
19	20	21				
Time: 2 pm	Time:	Time:	Time:	Time:		
	Time: Training Title:	Time: Training Title:	Time: Training Title:	Time: Training Title:		
Time: 2 pm Training in Blue Pippin 3	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:		
Time: 2 pm	Time: Training Title:	Time: Training Title:	Time: Training Title:	Time: Training Title:		
Time: 2 pm Training in Blue Pippin 3	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:		
Time: 2 pm Training in Blue Pippin 3 tgs@kaust.edu.sa	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:		
Time: 2 pm Training in Blue Pippin 3 3 tgs@kaust.edu.sa  26 Time: 2 pm	Time: Training Title: Capacity: Contact: 27 Time:	Time: Training Title: Capacity: Contact:  28 Time:	Time: Training Title: Capacity: Contact:  29 Time:	Time: Training Title: Capacity: Contact:  30 Time:		
Time: 2 pm Training in Blue Pippin 3 tgs@kaust.edu.sa 26	Time: Training Title: Capacity: Contact: 27	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact: 30		

## May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time: 9am	Time:	Time:	Time:	Time:		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
10	11	12	13	14	15	16
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time: 2 pm	Time:	Time:	Time:	Time:	22	23
Training in Blue Pippin	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tos@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
igotanador.cod.od						
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
31						
Time:						
Training Title:						
Capacity:						
Contact:		"	"			

Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
	Time:	Time:	Time:	Time:		
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
7	8	9	10	11	12	13
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
14	15	16	17	18	19	20
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
28	29	30				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
						-
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	·	·	·	· ·	•	•
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

Aug-20

Sat	Fri	Thu	Wed	Tue	Mon	Sun
8	7	6	5	4	3	2
		Time:	Time:	Time:	Time:	Time:
		Training Title:				
		Capacity:	Capacity:	Capacity:	Capacity:	Capacity:
		Contact:	Contact:	Contact:	Contact:	Contact:
15	14	13	12	11	10	9
		Time:	Time:	Time:	Time:	Time:
		Training Title:				
		Capacity:	Capacity:	Capacity:	Capacity:	Capacity:
		Contact:	Contact:	Contact:	Contact:	Contact:
22	21	20	19	18	17	16
		Time:	Time:	Time:	Time:	Time:
		Training Title:				
		Capacity:	Capacity:	Capacity:	Capacity:	Capacity:
		Contact:	Contact:	Contact:	Contact:	Contact:

23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:					
Training Title:	Training Title:					
Capacity:	Capacity:					
Contact:	Contact:					

#### Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
_		-	-			
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
						1
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
27	28	29	30			
Time:	Time:	Time:	Time:			
Training Title:	Training Title:	Training Title:	Training Title:			
Capacity:	Capacity:	Capacity:	Capacity:			
Contact:	Contact:	Contact:	Contact:			

#### Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time:		
				Training Title:		
				Capacity:		
				Contact:		
4	5	6	7	8	9	10
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
18	19	20	21	22	23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
25	26	27	28	29	30	31
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

To register for tool training, the requester should:
a. complete the "Lab Safety Training" (Conducted by HSE Department)
b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)

c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department) d. register in the Badger Booking System

# PROTEOMICS BIOSCIENCE CORE LAB

# INSTRUMENT TRAINING CALENDAR

### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for peptide analysis		
Capacity: 4	Capacity: 4		Capacity: 4	Capacity: 4		
Contact: Huma Khurram	Contact: Huma Khurram		Contact: Huma Khurram	Contact: Huoming Zhang		
			<u> </u>			
10	11 10:00	12	13	14	15	16
	Floid cell imaging					
	Capacity: 4					
	Contact: Kosuke Sakashita					
	Time: 11:00	9:00				
	Training Title: Ultracentrifuge	Protein expression & purification				
	Capacity: 4	Capacity: 4				
	Contact: Kosuke Sakashita	Contact: Kosuke Sakashita				
	13:00					
	Spectramax Plate reader Capacity: 4					
	Contact: Kosuke Sakashita					
	14:00	-				
	Monolith NT.115Pico					
	Capacity: 4					
	Contact: Kosuke Sakashita					
17	18	19	20	21	22	23
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for intact protein analysis		
Capacity: 4 Contact: Huma Khurram	Capacity: 4 Contact: Huoming Zhang		Capacity: 4 Contact: Huma Khurram	Capacity: 4 Contact: Huma Khurram		
CONTACT. Fluing Knuffdff	Contact. Fluoring Zriang	1	Contact. Fluina Kriunalli	Contact. Fluma Kriundili		
24	25	26	27	28	29	30
	10:00					
	Floid cell imaging					
1	Capacity: 4	1		1		

	Contact: Kosuke Sakashita	
1	Time: 11:00	9:00
	Training Title: Ultracentrifuge	Biacore T200
	Capacity: 4	Capacity: 4
	Contact: Kosuke Sakashita	Contact: Kosuke Sakashita
	13:00	
	Spectramax Plate reader	
	Capacity: 4	
	Contact: Kosuke Sakashita	
	14:00	
	Monolith NT.115Pico	
	Capacity: 4	
	Contact: Kosuke Sakashita	

# Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for peptide analysis		
Capacity: 4	Capacity: 4		Capacity: 4	Capacity: 4		
Contact: Huma Khurram	Contact: Huma Khurram		Contact: Huma Khurram	Contact: Huoming Zhang		
	•					
8	9	10	11	12	13	14
	10:00					
	Floid cell imaging					
	Capacity: 4					
	Contact: Kosuke Sakashita					
	Time: 11:00	9:00				
	Training Title: Ultracentrifuge	Protein expression & purification				
	Capacity: 4	Capacity: 4				
	Contact: Kosuke Sakashita	Contact: Kosuke Sakashita				
	13:00	ornasii Hoodho Ganasiina				
	Spectramax Plate reader					
	Capacity: 4					
	Contact: Kosuke Sakashita					
	14:00					
	Monolith NT.115Pico					
	Capacity: 4					
	Contact: Kosuke Sakashita					
			_			
15	16	17	18	19	20	21
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for intact protein analysis		
Capacity: 4	Capacity: 4		Capacity: 4	Capacity: 4		
Contact: Huma Khurram	Contact: Huoming Zhang		Contact: Huma Khurram	Contact: Huma Khurram		
		1				
22	23	24	25	26	27	28
		-				
1	10:00	]				

	Floid cell imaging Capacity: 4 Contact: Kosuke Sakashita Time: 11:00  Training Title: Ultracentrifuge Capacity: 4 Contact: Kosuke Sakashita 13:00  Spectramax Plate reader Capacity: 4 Contact: Kosuke Sakashita 14:00  Monolith NT.115Pico Capacity: 4 Contact: Kosuke Sakashita	9:00 Biacore T200 Capacity: 4 Contact: Kosuke Sakashita		
29	30	31		

# BIOINFORMATICS BIOSCIENCE CORE LAB

#### INSTRUMENT TRAINING CALENDAR

### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Time:	Time:	14:00-16:00	Time:		
Training Title:	Training Title:	Training Title:	BCL Bioinformatics clinic	Training Title:		
Capacity:	Capacity:	Capacity:	3	Capacity:		
Contact:	Contact:	Contact:	yoshinori.fukasawa@kaust.edu.sa	Contact:		

#### Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
8	9	10	11	12	13	14
Time:	Time:	Time:	14:00-16:00	Time:		
Training Title:	Training Title:	Training Title:	BCL Bioinformatics clinic	Training Title:		
Capacity:	Capacity:	Capacity:	3	Capacity:		
Contact:	Contact:	Contact:	voshinori.fukasawa@kaust.edu.sa	Contact:		
	•		-			
15	16	17	18	19	20	21
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	14:00-16:00	Time:		
Training Title:	Training Title:	Training Title:	BCL Bioinformatics clinic	Training Title:		
Capacity:	Capacity:	Capacity:	3	Capacity:		
Contact:	Contact:	Contact:	voshinori.fukasawa@kaust.edu.sa	Contact:		
	•		•			•
29	30	31			<u> </u>	
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

#### Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
	_	7	_			
5	6		8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:	''	
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
oontact.	Contact.	Contact.	Contact.	Contact.		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

### Feb-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

### Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	-			-		-
8	9	10	11	12	13	14
8 Time:	9 Time:	10 Time:	11 Time:	12 Time:	13	14
8 Time: Training Title:	9 Time: Training Title:	10	- "		13	14
		Time:	Time:	Time:	13	14
Training Title:	Training Title:	Time: Training Title:	Time: Training Title:	Time: Training Title:	13	14
Training Title: Capacity:	Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	13	14

Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	9:30-11:00 Practical Basic Linux for Biologists 40 issaac.rajan@kaust.edu.sa	Time: Training Title: Capacity: Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
29	30	31				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

# Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	_		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:	10	
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
		Capacity: Contact:				
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	9:30-10:30	Time:	• • • • • • • • • • • • • • • • • • • •	
Training Title:	Training Title:	Training Title:	duction to FastQC and its interpret	Training Title:		
Capacity:	Capacity:	Capacity:	40	Capacity:		
Contact:	Contact:	Contact:	issaac.rajan@kaust.edu.sa	Contact:		
	-					
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	27					
26		28	29	30		
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

# May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17				21		
	18	19	20		22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Z5 Time:	Time:	Time:	Time:	29	30
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

31			
Time:			
Training Title:			
Capacity: Contact:			
Contact:			

### Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
	Time:	Time:	Time:	Time:		
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
7	8	9	10	11	12	13
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
14	15	16	17	18	19	20
Time:	Time:	Time:	Time:	Time:	19	20
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		-
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
oomadi.	Contact	Contact	oontaot.	oontdo.		
28	29	30				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				i i

# Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	7	8	9	40	11
				Time:	10	11
Time:	Time:	Time:	Time:	******		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
CONTROL.	Contact.	Contact.	Contact.	Contact.		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
			1		-	
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:					
Training Title:	Training Title:					
Capacity:	Capacity:					
Contact:	Contact:					

# Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
27	28	29	30			
Time:	Time:	Time:	Time:			
Training Title:	Training Title:	Training Title:	Training Title:			
Capacity:	Capacity:	Capacity:	Capacity:			
Contact:	Contact:	Contact:	Contact:			

### Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time: Training Title: Capacity: Contact:		
	_	_	_	_		
4	5	6	7	8	9	10
Time: Training Title:						

Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
			•		•	•
18	19	20	21	22	23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
		Contact:	Contact:	Contact:		
		Contact:	Contact:	Contact:	30	31
Contact:	Contact:				30	31
Contact:	Contact:	27	28	29	30	31
Contact:  25 Time:	Contact:  26 Time:	27 Time:	28 Time:	29 Time:	30	31

- To register for tool training, the requester should:
  a. complete the "Lab Safety Training" (Conducted by HSE Department)
  b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
  c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
  d. register in the Badger Booking System

# NGS, SINGLE CELL & FACS / FA BIOSCIENCE CORE LAB

# **INSTRUMENT TRAINING CALEND.**

# Nov-19

Sun	Mon	Tue	Wed
3	4	5	6
		9:30	9:30
		Flow Cytometry	Flow Cytometry
		Capacity: 3	Capacity: 3
		FACS@kaust.ed.usa	FACS@kaust.ed.usa
10	11	12	13
17	18	19	20
		14:00	14:00
		Flow Cytometry	Flow Cytometry
		Capacity: 3	Capacity: 3
		FACS@kaust.ed.usa	FACS@kaust.ed.usa
24	25	26	27

# Dec-19

Sun	Mon	Tue	Wed
1	2	3	4
		9:30	9:30
		Flow Cytometry	Flow Cytometry
		Capacity: 3	Capacity: 3
		FACS@kaust.ed.usa	FACS@kaust.ed.usa
8	9	10	11
<u> </u>			
15	16	17	18
15	18	14:00	14:00
		Flow Cytometry	Flow Cytometry
		Capacity: 3	Capacity: 3
1		FACS@kaust.ed.usa	FACS@kaust.ed.usa
22	23	24	25
	20	2-7	20
		-	-
29	30	31	
		9:30	
		Flow Cytometry	

# Capacity: 3 FACS@kaust.ed.usa

# Jan-20

Sun	Mon	Tue	Wed
			1
			9:30
			Flow Cytometry
			Capacity: 3
			<u>FACS@kaust.ed.usa</u>
_		7	
5	6	7	8
12	13	14	15
		14:00	14:00
		Flow Cytometry	Flow Cytometry
		Capacity: 3	Capacity: 3
		FACS@kaust.ed.usa	FACS@kaust.ed.usa
19	20	21	22
		1	1
26	27	28	29
		9:30	9:30
		Flow Cytometry	Flow Cytometry
		Capacity: 3	Capacity: 3

FACS@kaust.ed.usa	FACS@kaust.ed.usa
i Addiwikausi.cu.usa	i Acciditadat.ca.aa

# Feb-20

Sun	Mon	Tue	Wed
2	3	4	5
9	10	11	12
		14:00	14:00
		Flow Cytometry	Flow Cytometry
		Capacity: 3	Capacity: 3
		FACS@kaust.ed.usa	FACS@kaust.ed.usa
16	17	18	19
23	24	25	26
		9:30	9:30
		Flow Cytometry	Flow Cytometry
		Capacity: 3	Capacity: 3
		FACS@kaust.ed.usa	FACS@kaust.ed.usa

# Mar-20

Sun	Mon	Tue	Wed
1	2	3	4
Time:	Time:	Time:	Time:

Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
8	9	10	11
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
15	16	17	18
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
22	23	24	25
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
29	30	31	
Time:	Time:	Time:	
Training Title:	Training Title:	Training Title:	
Capacity:	Capacity:	Capacity:	
Contact:	Contact:	Contact:	

# Apr-20

Sun	Mon	Tue	Wed
			1
			Time:
			Training Title:
			Training Title: Capacity:

			Contact:
5	6	7	8
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
12	13	14	15
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
19	20	21	22
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
26	27	28	29
		-	
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

# May-20

Sun	Mon	Tue	Wed
3	4	5	6
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

10	11	12	13
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
17	18	19	20
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
24	25	26	27
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
		•	
31			
Time:			
Training Title:			
Capacity:			
Contact:			

# Jun-20

Sun	Mon	Tue	Wed
	1	2	3
	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:
7	8	9	10

| Time: Training Title: Capacity: Contact: |
|--|--|--|--|
| 14                                       | 15                                       | 16                                       | 17                                       |
| Time:                                    | Time:                                    | Time:                                    | Time:                                    |
| Training Title:                          | Training Title:                          | Training Title:                          | Training Title:                          |
| Capacity:                                | Capacity:                                | Capacity:                                | Capacity:                                |
| Contact:                                 | Contact:                                 | Contact:                                 | Contact:                                 |
|  |  |  |  |
| 21                                       | 22                                       | 23                                       | 24                                       |
| Time:                                    | Time:                                    | Time:                                    | Time:                                    |
| Training Title:                          | Training Title:                          | Training Title:                          | Training Title:                          |
| Capacity:                                | Capacity:                                | Capacity:                                | Capacity:                                |
| Contact:                                 | Contact:                                 | Contact:                                 | Contact:                                 |
|  |  |  |  |
| 28                                       | 29                                       | 30                                       |  |
| Time:                                    | Time:                                    | Time:                                    |  |
| Training Title:                          | Training Title:                          | Training Title:                          |  |
| Capacity:                                | Capacity:                                | Capacity:                                |  |
| Contact:                                 | Contact:                                 | Contact:                                 |  |

# Jul-20

Sun	Mon	Tue	Wed
			1
			Time: Training Title: Capacity: Contact:
5	6	7	8
Time: Training Title:	Time: Training Title:	Time: Training Title:	Time: Training Title:

Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
12	13	14	15
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
19	20	21	22
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
26	27	28	29
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

# Aug-20

Sun	Mon	Tue	Wed
2	3	4	5
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
9	10	11	12
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

16	17	18	19
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
23	24	25	26
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
30	31		
Time:	Time:		
Training Title:	Training Title:		
Capacity:	Capacity:		
Contact:	Contact:		

# Sep-20

Sun	Mon	Tue	Wed
		1	2
		Time:	Time:
		Training Title:	Training Title:
		Capacity:	Capacity:
		Contact:	Contact:
		Contact.	oontaot.
		oontdot.	oontaot.
6	7	8	9
6 Time:	7 Time:		
<u> </u>	7 Time: Training Title:	8	9
Time:		8 Time:	9 Time:

13	14	15	16
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
20	21	22	23
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
27	28	29	30
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

# Oct-20

Sun	Mon	Tue	Wed
	_	-	
4	5	6	7
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
11	12	13	14

Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
18	19	20	21
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
25	26	27	28
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

# To register for tool training, the requester should:

- a. complete the "Lab Safety Training" (Conducted by HSE Department)
- b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
- c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
- d. register in the Badger Booking System

CS

AR

Thu	Fri	Sat
7	8	9
14	15	16
14	13	10
21	22	23
28	29	30

ı		
Thu	Eu:	Sat
Thu	Fri	Sat
5	6	7
40	40	4.4
12	13	14
19	20	21
26	27	28

Thu	Fri	Sat
2	3	4
_		
9	10	11
L		
16	17	18
23	24	25
30	31	
	Ţ.	
•		

Thu	Fri	Sat
6	7	8
13	14	15
20	21	22
0.7		I 00
27	28	29

Thu	Fri	Sat
5	6	7
Time:		

13	14
20	21
•	
27	28
	20

Thu	Fri	Sat
2	3	4
Time: Training Title:		

Contact:		
	40	44
9	10	11
Time:		
Training Title:		
Capacity:		
Contact:		
10	4-	40
16	17	18
Time:		
Training Title:		
Capacity:		
Contact:		
23	24	25
Time:		
Training Title:		
Capacity:		
Contact:		
30		
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
7	8	9
Time: Training Title: Capacity: Contact:		

14	15	16
Time:		
Training Title:		
Capacity:		
Contact:		
21	22	23
Time:		
Training Title:		
Capacity:		
Contact:		
28	29	30
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
4	5	6
Time: Training Title: Capacity: Contact:		
11	12	13

Time: Training Title: Capacity: Contact:		
18	19	20
Time: Training Title: Capacity: Contact:		
25	26	27
Time: Training Title: Capacity: Contact:	26	27
Time: Training Title: Capacity:	26	27
Time: Training Title: Capacity:	26	27

Thu	Fri	Sat
2	3	4
Time: Training Title: Capacity: Contact:		
9	10	11
Time: Training Title:		

Capacity: Contact:		
16	17	18
Time:		
Training Title:		
Capacity:		
Contact:		
23	24	25
Time:		
Training Title:		
Capacity:		
Contact:		
30	31	
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
6	7	8
Time:		
Training Title:		
Capacity:		
Contact:		
13	14	15
Time:		
Training Title:		
Capacity:		
Contact:		

20	21	22
Time:		
Training Title:		
Capacity:		
Contact:		
27	28	29
Time:		
Training Title:		
Capacity:		
Contact:		
	•	

Thu	Fri	Sat
3	4	5
Time:		
Training Title:		
Capacity:		
Contact:		
10	11	12
Time:		
Training Title:		
Capacity:		
Contact:		
	_	

17	18	19
Time:		
Training Title:		
Capacity:		
Contact:		
24	25	26
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
1	2	3
Time:		
Training Title:		
Capacity:		
Contact:		
8	9	10
Time:		
Training Title:		
Capacity:		
Contact:		
15	16	17

Time: Training Title: Capacity: Contact:		
22	23	24
Time:		
Training Title:		
Capacity:		
Contact:		
29	30	31
Time:		
Training Title:		
Capacity:		
Contact:		

#### NGS, SINGLE CELL & FACS / FACS BIOSCIENCE CORE LAB

#### INSTRUMENT TRAINING CALENDAR

#### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
10:00 qPCR Capacity: 3 NGSillumina@kaust.ed.usa		9:00 Library Preparation Capacity: 3 <u>NGSillumina@kaust.ed.usa</u>	9:00 Library Preparation Capacity: 3 NGSillumina@kaust.ed.usa			
10	11	12	13	14	15	16
	9:00 10x Genomics Capacity: 2 FACS@kaust.edu.sa			10:00 MiSeq training Capacity: 3 NGSillumina@kaust.ed.usa		
17	18	19	20	21	22	23
				10:00		
				Sequence Analisys Viewer - QC		
				Capacity: 5 NGSillumina@kaust.ed.usa		
24	25	26	27	28	29	30
		9:00 Library Preparation 3 NGSillumina@kaust.ed.usa	9:00 Library Preparation 3 NGSillumina@kaust.ed.usa			

### Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
10:00 qPCR Capacity: 3 NGSillumina@kaust.ed.usa	9:00 10x Genomics Capacity: 2 <u>FACS@kaust.edu.sa</u>			10:00 MiSeq training Capacity: 3 NGSillumina@kaust.ed.usa		
8	9	10	11	12	13	14
8	9	10	11	10:00 Sequence Analisys Viewer - QC Capacity: 5 NGSillumina@kaust.ed.usa	13	14
15	16	9:00	18 9:00	19	20	21
		Library Preparation 3 NGSillumina@kaust.ed.usa	Library Preparation 3 NGSillumina@kaust.ed.usa			
22	9:00 10x Genomics Capacity: 2 FACS@kaust.edu.sa	24	25	26 10:00 MiSeq training Capacity: 3 NGSillumina@kaust.ed.usa	27	28
29	30	31				
10:00 qPCR Capacity: 3 <u>NGSillumina@kaust.ed.usa</u>						

#### Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
				10:00		
				Sequence Analisys Viewer - QC		
				Capacity: 5		
				NGSillumina@kaust.ed.usa		
5	6	7	8	9	10	11

		9:00 Library Preparation 3 NGSillumina@kaust.ed.usa	9:00 Library Preparation 3 NGSillumina@kaust.ed.usa			
	l.					
12	13	14	15	16	17	18
	9:00			10:00		
	10x Genomics			MiSeq training		
	Capacity: 2			Capacity: 3		
	FACS@kaust.edu.sa			NGSillumina@kaust.ed.usa		
19	20	21	22	23	24	25
10:00				10:00		
qPCR				Sequence Analisys Viewer - QC		
Capacity: 3				Capacity: 5		
NGSillumina@kaust.ed.usa				NGSillumina@kaust.ed.usa		
·			•	•		
26	27	28	29	30	31	
9:00		9:00	9:00			
Introduction to NGS		Library Preparation	Library Preparation	1		
Capacity: 40		3	3			
NGSillumina@kaust.ed.usa	I	NGSillumina@kaust.ed.usa	NGSillumina@kaust.ed.usa			

#### Feb-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
	9:00			10:00		
	10x Genomics			MiSeq training		
	Capacity: 2			Capacity: 3		
	FACS@kaust.edu.sa			NGSillumina@kaust.ed.usa		
	- 10					
9	10	11	12	13 10:00	14	15
				Sequence Analisys Viewer - QC		
				Capacity: 5		
				NGSillumina@kaust.ed.usa		
16	17	18	19	20	21	22
10:00		9:00	9:00			
qPCR		Library Preparation	Library Preparation			
Capacity: 3		3	3			
NGSillumina@kaust.ed.usa		NGSillumina@kaust.ed.usa	NGSillumina@kaust.ed.usa			
	•	•				
23	24	25	26	27	28	29
<u> </u>						

# Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
8	9	10	11	12	13	14
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
15	16	17	18	19	20	21
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
29	30	31				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	_		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30		
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

# May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
31						
Time:						
Training Title:						
Capacity:		·				
Contact:						

# Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat		
	1	2	3	4	5	6		
	Time:	Time:	Time:	Time:				
	Training Title:	Training Title:	Training Title:	Training Title:				
	Capacity:	Capacity:	Capacity:	Capacity:				
	Contact:	Contact:	Contact:	Contact:				
7	8	9	10	11	12	13		
Time:	Time:	Time:	Time:	Time:				
Training Title:								
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:	Contact:	Contact:				
					-			
14	15	16	17	18	19	20		
Time:	Time:	Time:	Time:	Time:				
Training Title:								

Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
28	29	30				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

### Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	-	8	q	10	11
9:00	Time:	Time:	Time:	Time:	10	
Introduction to NGS	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity: 40	Capacity:	Capacity:	Capacity:	Capacity:		
	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:		
NGSillumina@kaust.ed.usa	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	-					
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

# Aug-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:					
Training Title:	Training Title:					
Capacity:	Capacity:					
Contact:	Contact:			,		

Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
						1
27	28	29	30		_	
Time:	Time:	Time:	Time:			
Training Title:	Training Title:	Training Title:	Training Title:			
Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:			
Contact:	Contact:	Contact:	Contact:			

Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time:		
				Training Title:		
				Capacity:		
				Contact:		
4	5	6	7	8	9	10
Time:	Time:	Time:	Time:	Time:	,	- 10
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
COITEGE.	Contact.	Contact.	Contact.	Contact.		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
18	19	20	21	22	23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
25	26	27	28	29	30	31
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

To register for tool training, the requester should:
a. complete the "Lab Safety Training" (Conducted by HSE Department)
b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
d. register in the Badger Booking System

#### SANGER & THIRD GENERATION SEQUENCING BIOSCIENCE CORE LAB

#### INSTRUMENT TRAINING CALENDAR

#### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	•			•		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

#### Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time: 9am	Time:	Time:	Time:	Time:		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa	l					
8	9	10	11	12	13	14
Time: 2 pm	Time:	Time:	Time:	Time:	13	14
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
			-		-	
15	16	17	18	19	20	21
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Blue Pippin	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
22	Z3 Time:	Z4 Time:	Z5 Time:	Z6 Time:	21	∠8
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
29	30	31				
Time: 2 pm	Time:	Time:				
Training in Fragment Analyzer	Training Title:	Training Title:				
3	Capacity:	Capacity:				
tgs@kaust.edu.sa	Contact:	Contact:				

# Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Training Title: Capacity:	Time: Training Title: Capacity:		
			Contact:	Contact:		

Time: 9am   Time:   Time:   Time:   Time:   Time:   Training Title:   Capacity:	5	6	7	8	9	10	11
Electrophoresis   Training Inte:   Tra	Time: 9am	Time:	Time:	Time:	Time:		
Igs@kauste.edu.sa		Training Title:	Training Title:	Training Title:	Training Title:		
Time: 2 pm Training in Blue Pippin 3 1gs@kaust.edu.sa  12 13 14 15 16 17 18 Time: 2 pm Training Time: 2 pm Training Time: Training Title: Training Title: Training Title: Training Title: Capacity: Capacity: Capacity: Capacity: Contact: C	3	Capacity:	Capacity:	Capacity:	Capacity:		
Training in Blue Pippin   3   3   3   3   3   4   15   16   17   18	tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
12   13   14   15   16   17   18	Time: 2 pm						
12	Training in Blue Pippin						
12	3						
Time: 2 pm	tgs@kaust.edu.sa						
Time: 2 pm							
Training in Fragment Analyzer   September   Training Title:   Training Title:   Training Title:   Training Title:   Capacity:   Capacity						17	18
Capacity:   Capa							
tgs@kaust.edu.sa         Contact:         Time:         Time:         Time:         Time:         Time:         Time:         Time:         Training Title:         Training Title:         Training Title:         Training Title:         Training Title:         Contact:         Contact: <th< td=""><td>Training in Fragment Analyzer</td><td></td><td></td><td></td><td></td><td></td><td></td></th<>	Training in Fragment Analyzer						
19   20   21   22   23   24   25	3						
Time: 2 pm	tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm   Time:   Training Title:   Training Title:   Training Title:   Training Title:   Training Title:   Training Title:   Capacity:	- 12						
Training in Blue Pippin Training Title: Capacity: Capacity: Capacity: Capacity: Capacity: Contact:  26 27 28 29 30 31  Time: 2pm Time: Time: Time: Time: Time: Time: Time: Time: Training in Fragment Analyzer Training Title: Capacity: Capacit						24	25
3         Capacity: tys@kaust.edu.sa         Capacity: Contact:         Capacity: Contact:         Capacity: Contact:         Capacity: Contact:           26         27         28         29         30         31           Time: 2 pm Training in Fragment Analyzer         Time: Training Title: Training Title: Training Title: Training Title: Training Title: Training Title: Capacity: Capacity: Capacity: Capacity: Capacity: Capacity:         Capacity: Capacity: Capacity: Capacity: Capacity:							
tgs@kaust.edu.sa         Contact:         Contact:         Contact:         Contact:           26         27         28         29         30         31           Time: 2 pm         Time:         Time:         Time:         Time:           Training in Fragment Analyzer         Training Title:         Training Title:         Training Title:         Training Title:           3         Capacity:         Capacity:         Capacity:         Capacity:	Training in Blue Pippin						
26         27         28         29         30         31           Time: 2 pm         Time: Time: Time: Time: Time: Time: Training Title: Training Tit	3						
Time: 2 pm Time: Time: Time: Time: Time: Time: Training in Fragment Analyzer Training Title: Time:	tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm Time: Time: Time: Time: Time: Training Title: Train	26	27	20	20	20	24	
Training in Fragment Analyzer Training Title:						31	
3 Capacity: Capacity: Capacity: Capacity:							
	rranning in rrayment Analyzer						
	tas@kaust.edu.sa	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:		

# Feb-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time: 9am	Time:	Time:	Time:	Time:		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
9	10	11	12	13	14	15
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Blue Pippin	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time: 2 pm	Time:	Z5 Time:	Z6 Time:	Time:	∠8	29
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
rraining in rragment Analyzer	Capacity:	Capacity:	Capacity:	Capacity:		
4	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		

# Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time: 9am	Time:	Time:	Time:	Time:		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
8	9	10	11	12	13	14
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
15	16	17	18	19	20	21
Time: 2 pm	Time:	Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
Training in Blue Pippin	Training Title:					
Training in Blue Pippin 3	Capacity:	Capacity:	Capacity:	Capacity:		
Training in Blue Pippin 3 tgs@kaust.edu.sa			Capacity: Contact:	Capacity: Contact:		
3	Capacity:	Capacity:			27	28

Time: 2 pm Training in Fragment Analyzer 3 tgs@kaust.edu.sa	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	
29	30	31			
Time: Training Title:	Time: Training Title:	Time: Training Title:			
Capacity: Contact:	Capacity: Contact:	Capacity: Contact:			

# Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:			
			Contact:	Contact:		
5	6	7	8	q	10	11
Time: 9am	Time:	Time:	Time:	Time:	10	- 11
	Time.	Time.	Time.	Time.		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
iga@kadat.edd.aa		l.				
12	13	14	15	16	17	18
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
			22	23		
					24	25
19	20	21				
Time: 2 pm	Time:	Time:	Time:	Time:		
	Time: Training Title:	Time: Training Title:	Time: Training Title:	Time: Training Title:		
Time: 2 pm Training in Blue Pippin 3	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:		
Time: 2 pm	Time: Training Title:	Time: Training Title:	Time: Training Title:	Time: Training Title:		
Time: 2 pm Training in Blue Pippin 3	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:		
Time: 2 pm Training in Blue Pippin 3 tgs@kaust.edu.sa	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:		
Time: 2 pm Training in Blue Pippin 3 3 tgs@kaust.edu.sa  26 Time: 2 pm	Time: Training Title: Capacity: Contact: 27 Time:	Time: Training Title: Capacity: Contact:  28 Time:	Time: Training Title: Capacity: Contact:  29 Time:	Time: Training Title: Capacity: Contact:  30 Time:		
Time: 2 pm Training in Blue Pippin 3 tgs@kaust.edu.sa	Time: Training Title: Capacity: Contact: 27	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact: 30		

# May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time: 9am	Time:	Time:	Time:	Time:	Ů	
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
10	11	12	13	14	15	16
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time: 2 pm	Time:	Time:	Time:	Time:	22	23
Training in Blue Pippin	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tos@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
tgs@kaust.edu.sa	Contact.	Contact.	Contact.	Contact.		
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
		_	_	_		
31						
Time:						
Training Title:						
Capacity:						
Contact:						

Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
	Time:	Time:	Time:	Time:		
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
7	8	9	10	11	12	13
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
14	15	16	17	18	19	20
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
28	29	30				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	•			•	•	
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

Aug-20

Sat	Fri	Thu	Wed	Tue	Mon	Sun
8	7	6	5	4	3	2
		Time:	Time:	Time:	Time:	Time:
		Training Title:				
		Capacity:	Capacity:	Capacity:	Capacity:	Capacity:
		Contact:	Contact:	Contact:	Contact:	Contact:
15	14	13	12	11	10	9
		Time:	Time:	Time:	Time:	Time:
		Training Title:				
		Capacity:	Capacity:	Capacity:	Capacity:	Capacity:
		Contact:	Contact:	Contact:	Contact:	Contact:
22	21	20	19	18	17	16
		Time:	Time:	Time:	Time:	Time:
		Training Title:				
		Capacity:	Capacity:	Capacity:	Capacity:	Capacity:
		Contact:	Contact:	Contact:	Contact:	Contact:

23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:					
Training Title:	Training Title:					
Capacity:	Capacity:					
Contact:	Contact:	,				

#### Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
27	28	29	30			
Time:	Time:	Time:	Time:			
Training Title:	Training Title:	Training Title:	Training Title:			
Capacity:	Capacity:	Capacity:	Capacity:			
Contact:	Contact:	Contact:	Contact:			

#### Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time:		
				Training Title:		
				Capacity:		
				Contact:		
4	5	6	7	8	9	10
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
18	19	20	21	22	23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
25	26	27	28	29	30	31
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

To register for tool training, the requester should:
a. complete the "Lab Safety Training" (Conducted by HSE Department)
b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)

c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department) d. register in the Badger Booking System

# PROTEOMICS BIOSCIENCE CORE LAB

# INSTRUMENT TRAINING CALENDAR

### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for peptide analysis		
Capacity: 4	Capacity: 4		Capacity: 4	Capacity: 4		
Contact: Huma Khurram	Contact: Huma Khurram		Contact: Huma Khurram	Contact: Huoming Zhang		
			<u> </u>			
10	11 10:00	12	13	14	15	16
	Floid cell imaging					
	Capacity: 4					
	Contact: Kosuke Sakashita					
	Time: 11:00	9:00				
	Training Title: Ultracentrifuge	Protein expression & purification				
	Capacity: 4	Capacity: 4				
	Contact: Kosuke Sakashita	Contact: Kosuke Sakashita				
	13:00					
	Spectramax Plate reader Capacity: 4					
	Contact: Kosuke Sakashita					
	14:00	-				
	Monolith NT.115Pico					
	Capacity: 4					
	Contact: Kosuke Sakashita					
17	18	19	20	21	22	23
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for intact protein analysis		
Capacity: 4 Contact: Huma Khurram	Capacity: 4 Contact: Huoming Zhang		Capacity: 4 Contact: Huma Khurram	Capacity: 4 Contact: Huma Khurram		
CONTACT. Fluing Knuffdff	Contact. Fluoring Zriang	1	Contact. Fluina Kriunalli	Contact. Fluma Kriundili		
24	25	26	27	28	29	30
	10:00					
	Floid cell imaging					
1	Capacity: 4	1		1		

	Contact: Kosuke Sakashita	
1	Time: 11:00	9:00
	Training Title: Ultracentrifuge	Biacore T200
	Capacity: 4	Capacity: 4
	Contact: Kosuke Sakashita	Contact: Kosuke Sakashita
	13:00	
	Spectramax Plate reader	
	Capacity: 4	
	Contact: Kosuke Sakashita	
	14:00	
	Monolith NT.115Pico	
	Capacity: 4	
	Contact: Kosuke Sakashita	

# Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for peptide analysis		
Capacity: 4	Capacity: 4		Capacity: 4	Capacity: 4		
Contact: Huma Khurram	Contact: Huma Khurram		Contact: Huma Khurram	Contact: Huoming Zhang		
	•					
8	9	10	11	12	13	14
	10:00					
	Floid cell imaging					
	Capacity: 4					
	Contact: Kosuke Sakashita					
	Time: 11:00	9:00				
	Training Title: Ultracentrifuge	Protein expression & purification				
	Capacity: 4	Capacity: 4				
	Contact: Kosuke Sakashita	Contact: Kosuke Sakashita				
	13:00	ornasii Hoodho Ganasiina				
	Spectramax Plate reader					
	Capacity: 4					
	Contact: Kosuke Sakashita					
	14:00					
	Monolith NT.115Pico					
	Capacity: 4					
	Contact: Kosuke Sakashita					
			_			
15	16	17	18	19	20	21
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for intact protein analysis		
Capacity: 4	Capacity: 4		Capacity: 4	Capacity: 4		
Contact: Huma Khurram	Contact: Huoming Zhang		Contact: Huma Khurram	Contact: Huma Khurram		
		1				
22	23	24	25	26	27	28
		-				
1	10:00	]				

	Floid cell imaging Capacity: 4 Contact: Kosuke Sakashita Time: 11:00  Training Title: Ultracentrifuge Capacity: 4 Contact: Kosuke Sakashita 13:00  Spectramax Plate reader Capacity: 4 Contact: Kosuke Sakashita 14:00  Monolith NT.115Pico Capacity: 4 Contact: Kosuke Sakashita	9:00 Biacore T200 Capacity: 4 Contact: Kosuke Sakashita		
29	30	31		

# BIOINFORMATICS BIOSCIENCE CORE LAB

#### INSTRUMENT TRAINING CALENDAR

### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Time:	Time:	14:00-16:00	Time:		
Training Title:	Training Title:	Training Title:	BCL Bioinformatics clinic	Training Title:		
Capacity:	Capacity:	Capacity:	3	Capacity:		
Contact:	Contact:	Contact:	yoshinori.fukasawa@kaust.edu.sa	Contact:		

#### Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
8	9	10	11	12	13	14
Time:	Time:	Time:	14:00-16:00	Time:		
Training Title:	Training Title:	Training Title:	BCL Bioinformatics clinic	Training Title:		
Capacity:	Capacity:	Capacity:	3	Capacity:		
Contact:	Contact:	Contact:	voshinori.fukasawa@kaust.edu.sa	Contact:		
	•		-			
15	16	17	18	19	20	21
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	14:00-16:00	Time:		
Training Title:	Training Title:	Training Title:	BCL Bioinformatics clinic	Training Title:		
Capacity:	Capacity:	Capacity:	3	Capacity:		
Contact:	Contact:	Contact:	voshinori.fukasawa@kaust.edu.sa	Contact:		
	•		•			•
29	30	31			<u> </u>	
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

#### Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

#### Feb-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

### Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
0	9	10	11	12	13	14
Time:	9 Time:	10 Time:	11 Time:	12 Time:	13	14
Time: Training Title:	Time: Training Title:				13	14
		Time:	Time:	Time:	13	14
Training Title:	Training Title:	Time: Training Title:	Time: Training Title:	Time: Training Title:	13	14
Training Title: Capacity:	Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	13	14

Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	9:30-11:00 Practical Basic Linux for Biologists 40 issaac.rajan@kaust.edu.sa	Time: Training Title: Capacity: Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
29	30	31				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

# Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	_		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:	10	
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
		Capacity: Contact:				
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	9:30-10:30	Time:	• • • • • • • • • • • • • • • • • • • •	
Training Title:	Training Title:	Training Title:	duction to FastQC and its interpret	Training Title:		
Capacity:	Capacity:	Capacity:	40	Capacity:		
Contact:	Contact:	Contact:	issaac.rajan@kaust.edu.sa	Contact:		
	-					
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	27					
26		28	29	30		
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

# May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17				21		
	18	19	20		22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Z5 Time:	Time:	Time:	Time:	29	30
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

31			
Time:			
Training Title:			
Capacity: Contact:			
Contact:			

### Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
	Time:	Time:	Time:	Time:		
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
7	8	9	10	11	12	13
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
14	15	16	17	18	19	20
Time:	Time:	Time:	Time:	Time:	19	20
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		-
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
oomadi.	Contact	Contact	oontaot.	oontdo.		
28	29	30				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				i i

# Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	7	8	9	40	11
				Time:	10	11
Time:	Time:	Time:	Time:	******		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
CONTROL.	Contact.	Contact.	Contact.	Contact.		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
			1		-	
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:					
Training Title:	Training Title:					
Capacity:	Capacity:					
Contact:	Contact:					

# Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
27	28	29	30			
Time:	Time:	Time:	Time:			
Training Title:	Training Title:	Training Title:	Training Title:			
Capacity:	Capacity:	Capacity:	Capacity:			
Contact:	Contact:	Contact:	Contact:			

### Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time: Training Title: Capacity: Contact:		
	_	_	_	_		
4	5	6	7	8	9	10
Time: Training Title:						

Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	-					
18	19	20	21	22	23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Capacity:						
Contact:	Contact:	Contact:	Contact:	Contact:		
		Contact:	Contact:	Contact:		
		Contact:	Contact:	Contact:	30	31
Contact:	Contact:				30	31
Contact:	Contact:	27	28	29	30	31
Contact:  25 Time:	Contact:  26 Time:	27 Time:	28 Time:	29 Time:	30	31

- To register for tool training, the requester should:
  a. complete the "Lab Safety Training" (Conducted by HSE Department)
  b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
  c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
  d. register in the Badger Booking System

#### NGS, SINGLE CELL & FACS / FACS BIOSCIENCE CORE LAB

# INSTRUMENT TRAINING CALENDAR

#### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
		9:30	9:30			
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
	·	·	·	·		
10	11	12	13	14	15	16
17	18	19	20	21	22	23
		14:00	14:00			
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
24	25	26	27	28	29	30

#### Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
		9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa			
-						
8	9	10	11	12	13	14
15	16	17	18	19	20	21
	.0	14:00 Flow Cytometry Capacity: 3 <u>FACS@kaust.ed.usa</u>	14:00 Flow Cytometry Capacity: 3 <u>FACS@kaust.ed.usa</u>		10	
22	23	24	25	26	27	28
29	30	31				
		9:30 Flow Cytometry Capacity: 3 <u>FACS@kaust.ed.usa</u>				

#### Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
Ouri	INIOII	Tue	4	2		
			9:30	2	3	4
			Flow Cytometry			
			Capacity: 3			
			FACS@kaust.ed.usa			
_		_	-			
5	6	7	8	9	10	11
	l			l		
12	13	14	15	16	17	18
12	13	14:00	14:00	16		10
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
19	20	21	22	23	24	25
	I .			1		
26	27	28	29	30	31	
30		9:30	9:30			
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
	The second secon	i Acolwiaust.eu.usa	i Acojwaust.eu.usa			

#### Feb-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
9	10	11	12	13	14	15
9	10	14:00 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	14:00 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
23	24	9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	21	20	29

### Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

8	9	10	11	12	13	14
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
15	16	17	18	19	20	21
Time:	Time:	Time:	Time:	Time:	20	
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
Contact.	contact.	Contact.	Contact.	Contact.		
29	30	31				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

# Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	_		
			Contact:	Contact:		
	•		·	•	•	•
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30		
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

# May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
,						
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
31						
Time:						
Training Title:						
Capacity:						
Contact:						

### Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
	Time:	Time:	Time:	Time:		
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
7	8	9	10	11	12	13
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
14	15	16	17	18	19	20
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
28	29	30				
Time:	Z9 Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity: Contact:	Capacity: Contact:	Capacity:				
Contact:	Contact:	Contact:				

# Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

# Aug-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:					
Training Title:	Training Title:					
Capacity:	Capacity:					
Contact:	Contact:					

### Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		

Contact:	Contact:	Contact:	Contact:	Contact:	
27	28	29	30		
Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:		

#### Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time:		
				Training Title:		
				Capacity:		
				Contact:		
4	5	6	7	8	9	10
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
18	19		21	22	20	
		20			23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
25	26	27	28	29	30	31
Time:	Time:	Time:	Time:	Time:	30	31
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		

To register for tool training, the requester should:
a. complete the "Lab Safety Training" (Conducted by HSE Department)
b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
d. register in the Badger Booking System

# NGS, SINGLE CELL & FACS / FA BIOSCIENCE CORE LAB

# **INSTRUMENT TRAINING CALEND.**

# Nov-19

Sun	Mon	Tue	Wed
3	4	5	6
10:00		9:00	9:00
qPCR		Library Preparation	Library Preparation
Capacity: 3		Capacity: 3	Capacity: 3
NGSillumina@kaust.ed.usa		NGSillumina@kaust.ed.usa	NGSillumina@kaust.ed.usa
10	11	12	13
	9:00		
	10x Genomics		
	Capacity: 2		
	FACS@kaust.edu.sa		
17	18	19	20
24	25	26	27

9:00	9:00
Library Preparation	Library Preparation
3	3
NGSillumina@kaust.ed.us	nGSillumina@kaust.ed.usa

# Dec-19

Sun	Mon	Tue	Wed
1	2	3	4
10:00	9:00		
qPCR	10x Genomics		
Capacity: 3	Capacity: 2		
NGSillumina@kaust.ed.usa	FACS@kaust.edu.sa		
8	9	10	11
15	16	17	18
13	10	9:00	9:00
		Library Preparation	Library Preparation
		3	3
		NGSillumina@kaust.ed.usa	NGSillumina@kaust.ed.usa
<u> </u>			
22	23	24	25
	9:00		
	10x Genomics		
	Capacity: 2		
	FACS@kaust.edu.sa		
29	30	31	
10:00			

qPCR	1	
Capacity: 3		
NGSillumina@kaust.ed.usa		

# Jan-20

Sun	Mon	Tue	Wed
			1
_	-	_	_
5	6	7	8
		9:00	9:00
		Library Preparation	Library Preparation
		3	3
		NGSillumina@kaust.ed.usa	NGSillumina@kaust.ed.usa
12	13	14	15
	9:00		
	10x Genomics		
	Capacity: 2		
	FACS@kaust.edu.sa		
19	20	21	22
10:00			
qPCR			
Capacity: 3			
NGSillumina@kaust.ed.usa			
26	27	28	29
9:00		9:00	9:00
Introduction to NGS		Library Preparation	Library Preparation

Capacity: 40 NGSillumina@kaust.ed.usa		<b>3</b> NGSillumina@kaust.ed.usa	<b>3</b> NGSillumina@kaust.ed.usa
			Feb-20
Sun	Mon	Tue	Wed
2	3	4	5
2	9:00 10x Genomics Capacity: 2 <u>FACS@kaust.edu.sa</u>	4	5
9	10	11	12
16	17	18	19
10:00 qPCR Capacity: 3 NGSillumina@kaust.ed.usa		9:00 Library Preparation 3 NGSillumina@kaust.ed.usa	9:00 Library Preparation 3 NGSillumina@kaust.ed.usa
23	24	25	26
			Mar-20
			iviar-20
Sun	Mon	Tue	Wed

1	2	3	4
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
8	9	10	11
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
15	16	17	18
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
22	23	24	25
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
29	30	31	
Time:	Time:	Time:	
Training Title:	Training Title:	Training Title:	
Capacity:	Capacity:	Capacity:	
Contact:	Contact:	Contact:	

# Apr-20

Sun	Mon	Tue	Wed
			1

			Time: Training Title: Capacity: Contact:
5	6	7	8
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
12	13	14	15
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
19	20	21	22
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
- Contagu	Contact	- Comaca	Contact
26	27	28	29
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

# May-20

Sun	Mon	Tue	Wed
3	4	5	6

Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
40		10	10
10	11	12	13
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
17	18	19	20
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
24	25	26	27
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
31			
Time:			
Training Title:			
Capacity:			
Contact:			
Contact.			

# Jun-20

Sun	Mon	Tue	Wed
	1	2	3

	Time:	Time:	Time:
	Training Title:	Training Title:	Training Title:
	Capacity:	Capacity:	Capacity:
	Contact:	Contact:	Contact:
	1		10
7 Time:	8 Time:	9 Time:	10 Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
14	15	16	17
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
21	22	23	24
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
Contact.	Contact.	Contact.	Contact.
28	29	30	
Time:	Time:	Time:	
Training Title:	Training Title:	Training Title:	
Capacity:	Capacity:	Capacity:	
Contact:	Contact:	Contact:	

# Jul-20

Sun	Mon	Tue	Wed
			1
			Time:

			Training Title: Capacity: Contact:
5	6	7	8
9:00	Time:	Time:	Time:
Introduction to NGS	Training Title:	Training Title:	Training Title:
Capacity: 40	Capacity:	Capacity:	Capacity:
GSillumina@kaust.ed.usa	Contact:	Contact:	Contact:
•			
12	13	14	15
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
19	20	21	22
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
26	27	28	29
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

# Aug-20

Sun	Mon	Tue	Wed
2	3	4	5
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:

Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
9	10	11	12
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
16	17	18	19
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
23	24	25	26
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
30	31		
Time:	Time:		
Training Title:	Training Title:		
Capacity:	Capacity:		
Contact:	Contact:		

# Sep-20

Sun	Mon	Tue	Wed
		1	2
		Time:	Time:
		Training Title:	Training Title:

		Capacity:	Capacity:
		Contact:	Contact:
6	7	8	9
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
	-		
13	14	15	16
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
20	21	22	23
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
27	28	29	30
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

# Oct-20

Sun	Mon	Tue	Wed

	•		
4	5	6	7
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
11	12	13	14
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
18	19	20	21
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
			<u> </u>
25	26	27	28
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
			1

- a. complete the "Lab Safety Training" (Conducted by HSE Department)
- b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
- c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
- d. register in the Badger Booking System

# AR

Thu	Fri	Sat
7	8	9
14	15	16
10:00		
MiSeq training		
Capacity: 3		
NGSillumina@kaust.ed.usa		
21	22	23
10:00		
Sequence Analisys Viewer - QC		
Capacity: 5		
NGSillumina@kaust.ed.usa		
28	29	30

Thu	Fri	Sat
5	6	7
10:00		
MiSeq training		
Capacity: 3		
NGSillumina@kaust.ed.usa		
12	13	14
10:00		
Sequence Analisys Viewer - QC		
Capacity: 5		
NGSillumina@kaust.ed.usa		
19	20	21
200	07	1 20
26 10:00	27	28
MiSeq training		
Capacity: 3		
NGSillumina@kaust.ed.usa		

Thu	Fri	Sat
2	3	4
10:00		
Sequence Analisys Viewer - QC		
Capacity: 5		
NGSillumina@kaust.ed.usa		
9	10	11
16	17	18
10:00	17	10
MiSeq training		
Capacity: 3		
NGSillumina@kaust.ed.usa		
- TOO MATHINITA (A), TA AOOL O AT AOOL		
23	24	25
10:00		
Sequence Analisys Viewer - QC		
Capacity: 5		
NGSillumina@kaust.ed.usa		
30	31	

Thu	Fri	Sat
6	7	8
10:00		
MiSeq training		
Capacity: 3		
NGSillumina@kaust.ed.usa		
13	14	15
10:00		
Sequence Analisys Viewer - QC		
Capacity: 5		
NGSillumina@kaust.ed.usa		
20	21	22
27	28	29
	20	29

Fri

Sat

Thu

5	6	7
Time:		
Training Title:		
Capacity:		
Contact:		
12	13	14
Time:		
Training Title:		
Capacity:		
Contact:		
19	20	21
Time:		
Training Title:		
Capacity:		
Contact:		
26	27	28
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
2	3	4

Time: Training Title:  Contact:		
9	10	11
Time:		
Training Title:		
Capacity:		
Contact:		
16	17	18
Time:		
Training Title:		
Capacity:		
Contact:		
23	24	25
Time:	24	25
Training Title:		
Capacity: Contact:		
Contact.		
30		
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
7	8	9

Time: Training Title: Capacity: Contact:		
14	15	16
Time:		
Training Title:		
Capacity:		
Contact:		
21	22	23
Time:		
Training Title:		
Capacity:		
Contact:		
28	29	30
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
4	5	6

Time: Training Title: Capacity: Contact:		
11	12	13
Time:		
Training Title:		
Capacity:		
Contact:		
18	19	20
Time:		
Training Title:		
Capacity:		
Contact:		
25	26	27
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
2	3	4
Time:		

Training Title: Capacity: Contact:		
Contact.		
9	10	11
Time:		···
Training Title:		
Capacity:		
Contact:		
16	17	18
Time:		
Training Title:		
Capacity:		
Contact:		
23	24	25
Time:		
Training Title:		
Capacity:		
Contact:		
30	31	
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
6	7	8
Time:		
Training Title:		

Capacity:		
Contact:		
13	14	15
Time:		
Training Title:		
Capacity:		
Contact:		
20	21	22
Time:		
Training Title:		
Capacity:		
Contact:		
27	28	29
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
3	4	5
Time:		
Training Title:		

Capacity:		
Contact:		
10	11	12
Time:		
Training Title:		
Capacity:		
Contact:		
17	18	19
Time:		
Training Title:		
Capacity:		
Contact:		
24	25	26
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
1	2	3
Time:		
Training Title:		

Capacity:		
Contact:		
	-	
8	9	10
Time:		
Training Title:		
Capacity:		
Contact:		
15	16	17
Time:		
Training Title:		
Capacity:		
Contact:		
22	23	24
Time:		
Training Title:		
Capacity:		
Contact:		
29	30	31
Time:		
Training Title:		
Capacity:		
Contact:		

## SANGER & THIRD GENERATION SEQUENCING BIOSCIENCE CORE LAB

### INSTRUMENT TRAINING CALENDAR

#### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	•			•		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

### Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time: 9am	Time:	Time:	Time:	Time:		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
8	9	10	11	12	13	14
Time: 2 pm	Time:	Time:	Time:	Time:	13	14
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
			-		-	
15	16	17	18	19	20	21
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Blue Pippin	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
22	Z3 Time:	Z4 Time:	Z5 Time:	Z6 Time:	21	∠8
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
29	30	31				
Time: 2 pm	Time:	Time:				
Training in Fragment Analyzer	Training Title:	Training Title:				
3	Capacity:	Capacity:				
tgs@kaust.edu.sa	Contact:	Contact:				

## Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Training Title: Capacity:	Time: Training Title: Capacity:		
			Contact:	Contact:		

Time: 9am   Time:   Time:   Time:   Time:   Time:   Training Title:   Capacity:	5	6	7	8	9	10	11
Electrophoresis   Training Inte:   Tra	Time: 9am	Time:	Time:	Time:	Time:		
Igs@kauste.edu.sa		Training Title:	Training Title:	Training Title:	Training Title:		
Time: 2 pm Training in Blue Pippin 3 1gs@kaust.edu.sa  12 13 14 15 16 17 18 Time: 2 pm Training Time: 2 pm Training Time: Training Title: Training Title: Training Title: Training Title: Capacity: Capacity: Capacity: Capacity: Contact: C	3	Capacity:	Capacity:	Capacity:	Capacity:		
Training in Blue Pippin   3   3   3   3   3   4   15   16   17   18	tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
12   13   14   15   16   17   18	Time: 2 pm						
12	Training in Blue Pippin						
12	3						
Time: 2 pm	tgs@kaust.edu.sa						
Time: 2 pm							
Training in Fragment Analyzer   September   Training Title:   Training Title:   Training Title:   Training Title:   Capacity:   Capacity						17	18
Capacity:   Capa							
tgs@kaust.edu.sa         Contact:         Time:         Time:         Time:         Time:         Time:         Time:         Time:         Training Title:         Training Title:         Training Title:         Training Title:         Training Title:         Contact:         Contact: <th< td=""><td>Training in Fragment Analyzer</td><td></td><td></td><td></td><td></td><td></td><td></td></th<>	Training in Fragment Analyzer						
19   20   21   22   23   24   25	3						
Time: 2 pm	tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm   Time:   Training Title:   Training Title:   Training Title:   Training Title:   Training Title:   Training Title:   Capacity:	- 12						
Training in Blue Pippin Training Title: Capacity: Capacity: Capacity: Capacity: Capacity: Contact:  26 27 28 29 30 31  Time: 2pm Time: Time: Time: Time: Time: Time: Time: Time: Training in Fragment Analyzer Training Title:						24	25
3         Capacity: tys@kaust.edu.sa         Capacity: Contact:         Capacity: Contact:         Capacity: Contact:         Capacity: Contact:           26         27         28         29         30         31           Time: 2 pm Training in Fragment Analyzer         Time: Training Title: Training Title: Training Title: Training Title: Training Title: Training Title: Capacity: Capacity: Capacity: Capacity: Capacity: Capacity:         Capacity: Capacity: Capacity: Capacity: Capacity:							
tgs@kaust.edu.sa         Contact:         Contact:         Contact:         Contact:           26         27         28         29         30         31           Time: 2 pm         Time:         Time:         Time:         Time:           Training in Fragment Analyzer         Training Title:         Training Title:         Training Title:         Training Title:           3         Capacity:         Capacity:         Capacity:         Capacity:	Training in Blue Pippin						
26         27         28         29         30         31           Time: 2 pm         Time: Time: Time: Time: Time: Time: Training Title: Training Tit	3						
Time: 2 pm Time: Time: Time: Time: Time: Time: Training in Fragment Analyzer Training Title: Time:	tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm Time: Time: Time: Time: Time: Training Title: Train	26	27	20	20	20	24	
Training in Fragment Analyzer Training Title:						31	
3 Capacity: Capacity: Capacity: Capacity:							
	rranning in rrayment Analyzer						
	tas@kaust.edu.sa	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:		

## Feb-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time: 9am	Time:	Time:	Time:	Time:		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
9	10	11	12	13	14	15
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Blue Pippin	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time: 2 pm	Time:	Z5 Time:	Z6 Time:	Time:	∠8	29
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
rraining in rragment Analyzer	Capacity:	Capacity:	Capacity:	Capacity:		
4	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:		
tgs@kaust.edu.sa	Guillact:	Contact:	Contact:	Contact:		

## Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time: 9am	Time:	Time:	Time:	Time:		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
8	9	10	11	12	13	14
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
15	16	17	18	19	20	21
Time: 2 pm	Time:	Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
Training in Blue Pippin	Training Title:					
Training in Blue Pippin 3	Capacity:	Capacity:	Capacity:	Capacity:		
Training in Blue Pippin 3 tgs@kaust.edu.sa			Capacity: Contact:	Capacity: Contact:		
3	Capacity:	Capacity:			27	28

Time: 2 pm Training in Fragment Analyzer 3 tgs@kaust.edu.sa	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	
29	30	31			
Time: Training Title:	Time: Training Title:	Time: Training Title:			
Capacity: Contact:	Capacity: Contact:	Capacity: Contact:			

## Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:			
			Contact:	Contact:		
5	6	7	8	q	10	11
Time: 9am	Time:	Time:	Time:	Time:	10	- 11
	Time.	Time.	Time.	Time.		
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
iga@kadat.edd.aa		l.				
12	13	14	15	16	17	18
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
			22	23		
					24	25
19	20	21				
Time: 2 pm	Time:	Time:	Time:	Time:		
	Time: Training Title:	Time: Training Title:	Time: Training Title:	Time: Training Title:		
Time: 2 pm Training in Blue Pippin 3	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:		
Time: 2 pm	Time: Training Title:	Time: Training Title:	Time: Training Title:	Time: Training Title:		
Time: 2 pm Training in Blue Pippin 3	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:		
Time: 2 pm Training in Blue Pippin 3 tgs@kaust.edu.sa	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:		
Time: 2 pm Training in Blue Pippin 3 3 tgs@kaust.edu.sa  26 Time: 2 pm	Time: Training Title: Capacity: Contact: 27 Time:	Time: Training Title: Capacity: Contact:  28 Time:	Time: Training Title: Capacity: Contact:  29 Time:	Time: Training Title: Capacity: Contact:  30 Time:		
Time: 2 pm Training in Blue Pippin 3 tgs@kaust.edu.sa 26	Time: Training Title: Capacity: Contact: 27	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact: 30		

## May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time: 9am	Time:	Time:	Time:	Time:	Ů	
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
Time: 2 pm						
Training in Blue Pippin						
3						
tgs@kaust.edu.sa						
10	11	12	13	14	15	16
Time: 2 pm	Time:	Time:	Time:	Time:		
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tgs@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time: 2 pm	Time:	Time:	Time:	Time:	22	23
Training in Blue Pippin	Training Title:	Training Title:	Training Title:	Training Title:		
3	Capacity:	Capacity:	Capacity:	Capacity:		
tos@kaust.edu.sa	Contact:	Contact:	Contact:	Contact:		
tgs@kaust.edu.sa	Contact.	Contact.	Contact.	Contact.		
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
31						
Time:	·					
Training Title:	·					
Capacity:	·					
Contact:						

Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
	Time:	Time:	Time:	Time:		
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
7	8	9	10	11	12	13
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
14	15	16	17	18	19	20
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
28	29	30				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	•			•	•	
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

Aug-20

Sat	Fri	Thu	Wed	Tue	Mon	Sun
8	7	6	5	4	3	2
		Time:	Time:	Time:	Time:	Time:
		Training Title:				
		Capacity:	Capacity:	Capacity:	Capacity:	Capacity:
		Contact:	Contact:	Contact:	Contact:	Contact:
15	14	13	12	11	10	9
		Time:	Time:	Time:	Time:	Time:
		Training Title:				
		Capacity:	Capacity:	Capacity:	Capacity:	Capacity:
		Contact:	Contact:	Contact:	Contact:	Contact:
22	21	20	19	18	17	16
		Time:	Time:	Time:	Time:	Time:
		Training Title:				
		Capacity:	Capacity:	Capacity:	Capacity:	Capacity:
		Contact:	Contact:	Contact:	Contact:	Contact:

23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:					
Training Title:	Training Title:					
Capacity:	Capacity:					
Contact:	Contact:	,				

### Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
27	28	29	30			
Time:	Time:	Time:	Time:			
Training Title:	Training Title:	Training Title:	Training Title:			
Capacity:	Capacity:	Capacity:	Capacity:			
Contact:	Contact:	Contact:	Contact:			

### Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time:		
				Training Title:		
				Capacity:		
				Contact:		
4	5	6	7	8	9	10
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
18	19	20	21	22	23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
25	26	27	28	29	30	31
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

To register for tool training, the requester should:
a. complete the "Lab Safety Training" (Conducted by HSE Department)
b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)

c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department) d. register in the Badger Booking System

# PROTEOMICS BIOSCIENCE CORE LAB

## INSTRUMENT TRAINING CALENDAR

## Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for peptide analysis		
Capacity: 4	Capacity: 4		Capacity: 4	Capacity: 4		
Contact: Huma Khurram	Contact: Huma Khurram		Contact: Huma Khurram	Contact: Huoming Zhang		
			<u> </u>			
10	11 10:00	12	13	14	15	16
	Floid cell imaging					
	Capacity: 4					
	Contact: Kosuke Sakashita					
	Time: 11:00	9:00				
	Training Title: Ultracentrifuge	Protein expression & purification				
	Capacity: 4	Capacity: 4				
	Contact: Kosuke Sakashita	Contact: Kosuke Sakashita				
	13:00					
	Spectramax Plate reader Capacity: 4					
	Contact: Kosuke Sakashita					
	14:00	-				
	Monolith NT.115Pico					
	Capacity: 4					
	Contact: Kosuke Sakashita					
17	18	19	20	21	22	23
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for intact protein analysis		
Capacity: 4 Contact: Huma Khurram	Capacity: 4 Contact: Huoming Zhang		Capacity: 4 Contact: Huma Khurram	Capacity: 4 Contact: Huma Khurram		
CONTACT. Fluing Knuffdff	Contact. Fluoring Zriang	1	Contact. Fluina Kriunalli	Contact. Fluma Kriundili		
24	25	26	27	28	29	30
	10:00					
	Floid cell imaging					
1	Capacity: 4	1		1		

	Contact: Kosuke Sakashita	
1	Time: 11:00	9:00
	Training Title: Ultracentrifuge	Biacore T200
	Capacity: 4	Capacity: 4
	Contact: Kosuke Sakashita	Contact: Kosuke Sakashita
	13:00	
	Spectramax Plate reader	
	Capacity: 4	
	Contact: Kosuke Sakashita	
	14:00	
	Monolith NT.115Pico	
	Capacity: 4	
	Contact: Kosuke Sakashita	

## Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for peptide analysis		
Capacity: 4	Capacity: 4		Capacity: 4	Capacity: 4		
Contact: Huma Khurram	Contact: Huma Khurram		Contact: Huma Khurram	Contact: Huoming Zhang		
	•					
8	9	10	11	12	13	14
	10:00					
	Floid cell imaging					
	Capacity: 4					
	Contact: Kosuke Sakashita					
	Time: 11:00	9:00				
	Training Title: Ultracentrifuge	Protein expression & purification				
	Capacity: 4	Capacity: 4				
	Contact: Kosuke Sakashita	Contact: Kosuke Sakashita				
	13:00	ornasii Hoodho Ganasiina				
	Spectramax Plate reader					
	Capacity: 4					
	Contact: Kosuke Sakashita					
	14:00					
	Monolith NT.115Pico					
	Capacity: 4					
	Contact: Kosuke Sakashita					
			-			
15	16	17	18	19	20	21
9:00	9:00		9:00	9:00		
In gel sample prep	MS Data analysis		Gel-free sample prep	LC-MS for intact protein analysis		
Capacity: 4	Capacity: 4		Capacity: 4	Capacity: 4		
Contact: Huma Khurram	Contact: Huoming Zhang		Contact: Huma Khurram	Contact: Huma Khurram		
		1				
22	23	24	25	26	27	28
		-				
1	10:00	]				

	Floid cell imaging Capacity: 4 Contact: Kosuke Sakashita Time: 11:00  Training Title: Ultracentrifuge Capacity: 4 Contact: Kosuke Sakashita 13:00  Spectramax Plate reader Capacity: 4 Contact: Kosuke Sakashita 14:00  Monolith NT.115Pico Capacity: 4 Contact: Kosuke Sakashita	9:00 Biacore T200 Capacity: 4 Contact: Kosuke Sakashita		
29	30	31		

## BIOINFORMATICS BIOSCIENCE CORE LAB

### INSTRUMENT TRAINING CALENDAR

## Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Time:	Time:	14:00-16:00	Time:		
Training Title:	Training Title:	Training Title:	BCL Bioinformatics clinic	Training Title:		
Capacity:	Capacity:	Capacity:	3	Capacity:		
Contact:	Contact:	Contact:	yoshinori.fukasawa@kaust.edu.sa	Contact:		

### Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
8	9	10	11	12	13	14
Time:	Time:	Time:	14:00-16:00	Time:		
Training Title:	Training Title:	Training Title:	BCL Bioinformatics clinic	Training Title:		
Capacity:	Capacity:	Capacity:	3	Capacity:		
Contact:	Contact:	Contact:	voshinori.fukasawa@kaust.edu.sa	Contact:		
	•		-			
15	16	17	18	19	20	21
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	14:00-16:00	Time:		
Training Title:	Training Title:	Training Title:	BCL Bioinformatics clinic	Training Title:		
Capacity:	Capacity:	Capacity:	3	Capacity:		
Contact:	Contact:	Contact:	voshinori.fukasawa@kaust.edu.sa	Contact:		
	•		•			•
29	30	31			<u> </u>	
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

### Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
	_	7	_			
5	6		8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:	''	
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
oontact.	Contact.	Contact.	Contact.	Contact.		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

## Feb-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

## Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	-			-		-
8	9	10	11	12	13	14
8 Time:	9 Time:	10 Time:	11 Time:	12 Time:	13	14
8 Time: Training Title:	9 Time: Training Title:	10	- "		13	14
		Time:	Time:	Time:	13	14
Training Title:	Training Title:	Time: Training Title:	Time: Training Title:	Time: Training Title:	13	14
Training Title: Capacity:	Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	Time: Training Title: Capacity:	13	14

Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	Time: Training Title: Capacity: Contact:	9:30-11:00 Practical Basic Linux for Biologists 40 issaac.rajan@kaust.edu.sa	Time: Training Title: Capacity: Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
29	30	31				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

## Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	_		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:	10	
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
		Capacity: Contact:				
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	9:30-10:30	Time:	• • • • • • • • • • • • • • • • • • • •	
Training Title:	Training Title:	Training Title:	duction to FastQC and its interpret	Training Title:		
Capacity:	Capacity:	Capacity:	40	Capacity:		
Contact:	Contact:	Contact:	issaac.rajan@kaust.edu.sa	Contact:		
	-					
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
	27					
26		28	29	30		
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

## May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17				21		
	18	19	20		22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Z5 Time:	Time:	Time:	Time:	29	30
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

31			
Time:			
Training Title:			
Capacity: Contact:			
Contact:			

## Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
	Time:	Time:	Time:	Time:		
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
7	8	9	10	11	12	13
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
14	15	16	17	18	19	20
Time:	Time:	Time:	Time:	Time:	19	20
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		-
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
oomadi.	Contact	Contact	oontaot.	oontdo.		
28	29	30				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				i i

## Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	7	8	9	40	11
				Time:	10	11
Time:	Time:	Time:	Time:	******		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
CONTROL.	Contact.	Contact.	Contact.	Contact.		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
			1		-	
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:					
Training Title:	Training Title:					
Capacity:	Capacity:					
Contact:	Contact:					

## Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
27	28	29	30			
Time:	Time:	Time:	Time:			
Training Title:	Training Title:	Training Title:	Training Title:			
Capacity:	Capacity:	Capacity:	Capacity:			
Contact:	Contact:	Contact:	Contact:			

## Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time: Training Title: Capacity: Contact:		
	_	_	_	_		
4	5	6	7	8	9	10
Time: Training Title:						

Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
18	19	20	21	22	23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Capacity:						
Contact:	Contact:	Contact:	Contact:	Contact:		
		Contact:	Contact:	Contact:		
		Contact:	Contact:	Contact:	30	31
Contact:	Contact:				30	31
Contact:	Contact:	27	28	29	30	31
Contact:  25 Time:	Contact:  26 Time:	27 Time:	28 Time:	29 Time:	30	31

- To register for tool training, the requester should:
  a. complete the "Lab Safety Training" (Conducted by HSE Department)
  b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
  c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
  d. register in the Badger Booking System

## NGS, SINGLE CELL & FACS / FACS BIOSCIENCE CORE LAB

## INSTRUMENT TRAINING CALENDAR

### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
		9:30	9:30			
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
	·	·	·	·		
10	11	12	13	14	15	16
17	18	19	20	21	22	23
		14:00	14:00			
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
24	25	26	27	28	29	30

### Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
		9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa			
-						
8	9	10	11	12	13	14
15	16	17	18	19	20	21
	.0	14:00 Flow Cytometry Capacity: 3 <u>FACS@kaust.ed.usa</u>	14:00 Flow Cytometry Capacity: 3 <u>FACS@kaust.ed.usa</u>		10	
22	23	24	25	26	27	28
29	30	31				
		9:30 Flow Cytometry Capacity: 3 <u>FACS@kaust.ed.usa</u>				

#### Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
Ouri	INIOII	Tue	4	2		
			9:30	2	3	4
			Flow Cytometry			
			Capacity: 3			
			FACS@kaust.ed.usa			
_		_	-			
5	6	7	8	9	10	11
	l			l		
12	13	14	15	16	17	18
12	13	14:00	14:00	16		10
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
19	20	21	22	23	24	25
	I .			1		
26	27	28	29	30	31	
30		9:30	9:30			
		Flow Cytometry	Flow Cytometry			
		Capacity: 3	Capacity: 3			
		FACS@kaust.ed.usa	FACS@kaust.ed.usa			
	The second secon	i Acogginaustieu.usa	i Acojwaust.eu.usa			

### Feb-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat				
2	3	4	5	6	7	8				
9	9 10 11 12 13 14 15									
9	10	14:00 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	14:00 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	13	14	15				
16	17	18	19	20	21	22				
23	24	25	26	27	28	29				
23	24	9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	9:30 Flow Cytometry Capacity: 3 FACS@kaust.ed.usa	21	20	29				

## Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

8	9	10	11	12	13	14
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
15	16	17	18	19	20	21
Time:	Time:	Time:	Time:	Time:	20	
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
Contact.	contact.	Contact.	Contact.	Contact.		
29	30	31				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

## Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	_		
			Contact:	Contact:		
	•		=	•	•	•
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30		
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

## May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
,						
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
31						
Time:						
Training Title:						
Capacity:						
Contact:						

## Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
	Time:	Time:	Time:	Time:		
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
7	8	9	10	11	12	13
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
14	15	16	17	18	19	20
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
28	29	30				
Time:	Z9 Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity: Contact:	Capacity: Contact:	Capacity:				
Contact:	Contact:	Contact:				

## Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

## Aug-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:					
Training Title:	Training Title:					
Capacity:	Capacity:					
Contact:	Contact:					

## Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		

Contact:	Contact:	Contact:	Contact:	Contact:			
27	28	29	30				
Time:	Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:	Contact:				

### Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time:		
				Training Title:		
				Capacity:		
				Contact:		
4	5	6	7	8	9	10
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
18	19		21	22	20	
		20			23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
25	26	27	28	29	30	31
Time:	Time:	Time:	Time:	Time:	30	31
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		

To register for tool training, the requester should:
a. complete the "Lab Safety Training" (Conducted by HSE Department)
b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
d. register in the Badger Booking System

#### NGS, SINGLE CELL & FACS / FACS BIOSCIENCE CORE LAB

#### INSTRUMENT TRAINING CALENDAR

#### Nov-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
10:00 qPCR Capacity: 3 NGSillumina@kaust.ed.usa		9:00 Library Preparation Capacity: 3 <u>NGSillumina@kaust.ed.usa</u>	9:00 Library Preparation Capacity: 3 NGSillumina@kaust.ed.usa			
10	11	12	13	14	15	16
	9:00 10x Genomics Capacity: 2 FACS@kaust.edu.sa			10:00 MiSeq training Capacity: 3 NGSillumina@kaust.ed.usa		
17	18	19	20	21	22	23
				10:00		
				Sequence Analisys Viewer - QC		
				Capacity: 5 NGSillumina@kaust.ed.usa		
24	25	26	27	28	29	30
		9:00 Library Preparation 3 NGSillumina@kaust.ed.usa	9:00 Library Preparation 3 NGSillumina@kaust.ed.usa			

## Dec-19

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
10:00 qPCR Capacity: 3 NGSillumina@kaust.ed.usa	9:00 10x Genomics Capacity: 2 <u>FACS@kaust.edu.sa</u>			10:00 MiSeq training Capacity: 3 NGSillumina@kaust.ed.usa		
8	9	10	11	12	13	14
8	9	10	11	10:00 Sequence Analisys Viewer - QC Capacity: 5 NGSillumina@kaust.ed.usa	13	14
15	16	17 9:00 Library Preparation 3 NGSillumina@kaust.ed.usa	18 9:00 Library Preparation 3 NGSillumina@kaust.ed.usa	19	20	21
22	23	24	25	26	27	28
44	9:00 10x Genomics Capacity: 2 FACS@kaust.edu.sa	24	23	10:00 MiSeq training Capacity: 3 NGSillumina@kaust.ed.usa	21	28
29	30	31				
10:00 qPCR Capacity: 3 <u>NGSillumina@kaust.ed.usa</u>		, .				

### Jan-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat	
			1	2	3	4	
				10:00			
				Sequence Analisys Viewer - QC			
				Capacity: 5			
				NGSillumina@kaust.ed.usa			
5	6	7	8	9	10	11	

		9:00 Library Preparation 3 NGSillumina@kaust.ed.usa	9:00 Library Preparation 3 NGSillumina@kaust.ed.usa			
	l.					
12	13	14	15	16	17	18
	9:00			10:00		
	10x Genomics			MiSeq training		
	Capacity: 2			Capacity: 3		
	FACS@kaust.edu.sa			NGSillumina@kaust.ed.usa		
19	20	21	22	23	24	25
10:00				10:00		
qPCR				Sequence Analisys Viewer - QC		
Capacity: 3				Capacity: 5		
NGSillumina@kaust.ed.usa				NGSillumina@kaust.ed.usa		
			•	•		
26	27	28	29	30	31	
9:00	· · · · · · · · · · · · · · · · · · ·	9:00	9:00			
Introduction to NGS		Library Preparation	Library Preparation			
Capacity: 40		3	3			
NGSillumina@kaust.ed.usa	I	NGSillumina@kaust.ed.usa	NGSillumina@kaust.ed.usa			

### Feb-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
	9:00			10:00		
	10x Genomics			MiSeq training		
	Capacity: 2			Capacity: 3		
	FACS@kaust.edu.sa			NGSillumina@kaust.ed.usa		
	4.0		12			
9	10	11	12	13 10:00	14	15
				Sequence Analisys Viewer - QC		
				Capacity: 5		
				NGSillumina@kaust.ed.usa		
				NG Siliul I lili la (Qika ust. e u. usa		
16	17	18	19	20	21	22
10:00		9:00	9:00			
qPCR		Library Preparation	Library Preparation			
Capacity: 3		3	3			
NGSillumina@kaust.ed.usa		NGSillumina@kaust.ed.usa	NGSillumina@kaust.ed.usa			
23	24	25	26	27	28	29
· ·	·					

## Mar-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
8	9	10	11	12	13	14
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
15	16	17	18	19	20	21
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
22	23	24	25	26	27	28
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
				-		
29	30	31				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

Apr-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	_		
			Contact:	Contact:		
5	6	7	8	9	10	11
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30		
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

#### May-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
3	4	5	6	7	8	9
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
10	11	12	13	14	15	16
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
17	18	19	20	21	22	23
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
24	25	26	27	28	29	30
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
31						
Time:						
Training Title:						
Capacity:						
Contact:						

#### Jun-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
	Time:	Time:	Time:	Time:		
	Training Title:	Training Title:	Training Title:	Training Title:		
	Capacity:	Capacity:	Capacity:	Capacity:		
	Contact:	Contact:	Contact:	Contact:		
7	8	9	10	11	12	13
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
					-	
14	15	16	17	18	19	20
Time:	Time:	Time:	Time:	Time:		
Training Title:						

Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
21	22	23	24	25	26	27
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
28	29	30				
Time:	Time:	Time:				
Training Title:	Training Title:	Training Title:				
Capacity:	Capacity:	Capacity:				
Contact:	Contact:	Contact:				

#### Jul-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
			Time:	Time:		
			Training Title:	Training Title:		
			Capacity:	Capacity:		
			Contact:	Contact:		
5	6	-	8	q	10	11
9:00	Time:	Time:	Time:	Time:	10	
Introduction to NGS	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity: 40	Capacity:	Capacity:	Capacity:	Capacity:		
	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:		
NGSillumina@kaust.ed.usa	Contact:	Contact:	Contact:	Contact:		
12	13	14	15	16	17	18
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
19	20	21	22	23	24	25
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
26	27	28	29	30	31	
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

#### Aug-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
2	3	4	5	6	7	8
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
9	10	11	12	13	14	15
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
16	17	18	19	20	21	22
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
23	24	25	26	27	28	29
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
30	31					
Time:	Time:	·				
Training Title:	Training Title:	·				
Capacity:	Capacity:					
Contact:	Contact:					

Sep-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3	4	5
		Time:	Time:	Time:		
		Training Title:	Training Title:	Training Title:		
		Capacity:	Capacity:	Capacity:		
		Contact:	Contact:	Contact:		
6	7	8	9	10	11	12
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
13	14	15	16	17	18	19
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
20	21	22	23	24	25	26
Time:	Time:	Time:	Time:	Time:		
Training Title:	Training Title:	Training Title:	Training Title:	Training Title:		
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
						1
27	28	29	30		_	
Time:	Time:	Time:	Time:			
Training Title:	Training Title:	Training Title:	Training Title:			
Capacity: Contact:	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:			
Contact:	Contact:	Contact:	Contact:			

Oct-20

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
				Time:		
				Training Title:		
				Capacity:		
				Contact:		
4	5	6	7	8	9	10
Time:	Time:	Time:	Time:	Time:	,	- 10
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
COITEGE.	Contact.	Contact.	Contact.	Contact.		
11	12	13	14	15	16	17
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
18	19	20	21	22	23	24
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		
25	26	27	28	29	30	31
Time:	Time:	Time:	Time:	Time:		
Training Title:						
Capacity:	Capacity:	Capacity:	Capacity:	Capacity:		
Contact:	Contact:	Contact:	Contact:	Contact:		

To register for tool training, the requester should:
a. complete the "Lab Safety Training" (Conducted by HSE Department)
b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
d. register in the Badger Booking System

# SANGER & THIRD GENERATION SEQUENCE CORE LAI

## INSTRUMENT TRAINING CALEND.

#### Nov-19

Sun	Mon	Tue	Wed
3	4	5	6
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
10	11	12	13
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
17	18	19	20
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
24	25	26	27
Time:	Time:	Time:	Time:

Training Title:	Training Title: Training Title:		Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

#### Dec-19

Sun	Mon	Tue	Wed
1	2	3	4
Time: 9am	Time:	Time:	Time:
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:
Time: 2 pm			
Training in Blue Pippin			
3			
tgs@kaust.edu.sa			
8	9	10	11
Time: 2 pm	Time:	Time:	Time:
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:
15	16	17	18
Time: 2 pm	Time:	Time:	Time:
Training in Blue Pippin	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:
igo@nausi.cuu.sa	Jointage.	- Contact.	J Johnson
22	23	24	25
	Time:	Time:	Time:
	Training Title:	Training Title:	Training Title:
	Capacity:	Capacity:	Capacity:

	Contact:	Contact:	Contact:
29	30	31	
Time: 2 pm	Time:	Time:	
Training in Fragment Analyzer	Training Title:	Training Title:	
3	Capacity:	Capacity:	
tgs@kaust.edu.sa	Contact:	Contact:	

## Jan-20

Sun	Mon	Tue	Wed
			1
			Time:
			Training Title:
			Capacity:
			Contact:
_			
5	6 Times	7 Time:	8 Times
Time: 9am	Time:	Time:	Time:
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:
Time: 2 pm			
Training in Blue Pippin			
3			
tgs@kaust.edu.sa			
12	13	14	15
Time: 2 pm	Time:	Time:	Time:
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:

19	20	21	22
Time: 2 pm	Time:	Time:	Time:
Training in Blue Pippin	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:
26	27	28	29
Time: 2 pm	Time:	Time:	Time:
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:

#### Feb-20

Sun	Mon	Tue	Wed
2	3	4	5
Time: 9am	Time:	Time:	Time:
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:
Time: 2 pm			
Training in Blue Pippin			
3			
tgs@kaust.edu.sa			
9	10	11	12
Time: 2 pm	Time:	Time:	Time:
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:
16	17	18	19
Time: 2 pm	Time:	Time:	Time:
Training in Blue Pippin	Training Title:	Training Title:	Training Title:

3	Capacity: Contact:	Capacity: Contact:	Capacity: Contact:
tgs@kaust.edu.sa	Contact.	Contact.	Contact.
23	24	25	26
Time: 2 pm	Time:	Time:	Time:
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:

#### Mar-20

Sun	Mon	Tue	Wed
1	2	3	4
Time: 9am	Time:	Time:	Time:
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:
Time: 2 pm			
Training in Blue Pippin			
3			
tgs@kaust.edu.sa			
8	9	10	11
Time: 2 pm	Time:	Time:	Time:
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:
15	16	17	18
Time: 2 pm	Time:	Time:	Time:
Training in Blue Pippin	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:

22	23	24	25
Time: 2 pm	Time:	Time:	Time:
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:
29	30	31	
Time:	Time:	Time:	
Training Title:	Training Title:	Training Title:	
Capacity:	Capacity:	Capacity:	
Contact:	Contact:	Contact:	

#### Apr-20

Sun	Mon	Tue	Wed
			1
			Time:
			Training Title:
			Capacity:
			Contact:
5	6	7	8
Time: 9am	Time:	Time:	Time:
Training in Pulse Field Gel	Training Title:	Training Title:	Training Title:
Electrophoresis	Training True.	Training True.	Training ride.
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:
Time: 2 pm			
Training in Blue Pippin			
3			
tgs@kaust.edu.sa			
-			
12	13	14	15
Time: 2 pm	Time:	Time:	Time:
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:

3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:
19	20	21	22
Time: 2 pm	Time:	Time:	Time:
Training in Blue Pippin	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:
26	27	28	29
Time: 2 pm	Time:	Time:	Time:
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:

## May-20

Sun	Mon	Tue	Wed
3	4	5	6
Time: 9am	Time:	Time:	Time:
Training in Pulse Field Gel Electrophoresis	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:
Time: 2 pm			
Training in Blue Pippin			
3			
tgs@kaust.edu.sa			
10	11	12	13
Time: 2 pm	Time:	Time:	Time:
Training in Fragment Analyzer	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:

17	18	19	20
Time: 2 pm	Time:	Time:	Time:
Training in Blue Pippin	Training Title:	Training Title:	Training Title:
3	Capacity:	Capacity:	Capacity:
tgs@kaust.edu.sa	Contact:	Contact:	Contact:
24	25	26	27
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
31			
Time:			
Training Title:			
Capacity:			
Contact:			

#### Jun-20

Sun	Mon	Tue	Wed
	1	2	3
	Time:	Time:	Time:
	Training Title:	Training Title:	Training Title:
	Capacity:	Capacity:	Capacity:
	Contact:	Contact:	Contact:
	Contact.	Contact.	Contact.
	Contact.	Contact.	Contact.
7	8 8	9	10
7 Time:			
7 Time: Training Title:	8	9	10
	8 Time:	9 Time:	10 Time:

14	15	16	17
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
21	22	23	24
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
28	29	30	
Time:	Time:	Time:	
Training Title:	Training Title:	Training Title:	
Capacity:	Capacity:	Capacity:	
Contact:	Contact:	Contact:	

#### Jul-20

Sun	Mon	Tue	Wed
			1
			Time:
			Training Title:
			Capacity:
			Contact:
5	6	7	8
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
12	13	14	15
Time:	Time:	Time:	Time:

| Training Title: Capacity: Contact: |
|------------------------------------|------------------------------------|------------------------------------|------------------------------------|
| 19                                 | 20                                 | 21                                 | 22                                 |
| Time:                              | Time:                              | Time:                              | Time:                              |
| Training Title:                    | Training Title:                    | Training Title:                    | Training Title:                    |
| Capacity:                          | Capacity:                          | Capacity:                          | Capacity:                          |
| Contact:                           | Contact:                           | Contact:                           | Contact:                           |
| 26                                 | 27                                 | 28                                 | 29                                 |
| Time:                              | Time:                              | Time:                              | Time:                              |
| Training Title:                    | Training Title:                    | Training Title:                    | Training Title:                    |
| Capacity:                          | Capacity:                          | Capacity:                          | Capacity:                          |
| Contact:                           | Contact:                           | Contact:                           | Contact:                           |

## Aug-20

Sun	Mon	Tue	Wed
2	3	4	5
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
9	10	11	12
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
		-	
16	17	18	19
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:

Contact:	Contact:	Contact:	Contact:
23	24	25	26
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
30	31		
Time:	Time:		
Training Title:	Training Title:		
Capacity:	Capacity:		
Contact:	Contact:		

#### Sep-20

Sun	Mon	Tue	Wed
		1	2
		Time:	Time:
		Training Title:	Training Title:
		Capacity:	Capacity:
		Contact:	Contact:
6	7	8	9
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
13	14	15	16
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

20	21	22	23
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
	•		
27	28	29	30
27 Time:	28 Time:	29 Time:	30 Time:
Time:	Time:	Time:	Time:

#### Oct-20

Sun	Mon	Tue	Wed
4	5	6	7
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
	<u> </u>		
11	12	13	14
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
	Capacity:	Capacity:	Capacity:
Capacity:	Capacity.	Oapacity.	- apacity:

18	19	20	21
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:
25	26	27	28
Time:	Time:	Time:	Time:
Training Title:	Training Title:	Training Title:	Training Title:
Capacity:	Capacity:	Capacity:	Capacity:
Contact:	Contact:	Contact:	Contact:

#### To register for tool training, the requester should:

- a. complete the "Lab Safety Training" (Conducted by HSE Department)
- b. complete the "Hazardous Waste Material Training" (Conducted by the HSE Department)
- c. complete the "Emergency and Crisis Management Training" (Conducted by the HSE Department)
- d. register in the Badger Booking System

## JENCING

AR

Thu	Fri	Sat
7	8	9
Time:		
Training Title:		
Capacity:		
Contact:		
14	15	16
Time:		
Training Title:		
Capacity:		
Contact:		
21	22	23
Time:		
Training Title:		
Capacity:		
Contact:		
28	29	30
Time:		

Training Title:	
Capacity:	
Contact:	

	_	
Thu	Fri	Sat
5	6	7
Time:		
Training Title:		
Training ride.		
Capacity:		
Contact:		
12	13	14
Time:		
Training Title:		
Capacity:		
Contact:		
19	20	21
Time:	20	21
Training Title:		
Capacity:		
Contact:		
Contact.		
26	27	28
Time:		
Training Title:		
Capacity:		
•		

Contact:	

Thu	Fri	Sat
2	3	4
Time:		
Training Title:		
Capacity:		
Contact:		
9	10	11
Time:		
Training Title:		
Capacity:		
Contact:		
16	17	18
Time:		
Training Title:		
Capacity:		
Contact:		

23	24	25
Time:		
Training Title:		
Capacity:		
Contact:		
30	31	
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
6	7	8
Time:		
Training Title:		
Capacity:		
Contact:		
13	14	15
Time:		
Training Title:		
Capacity:		
Contact:		
20	21	22
Time:		
Training Title:		

Capacity: Contact:		
27	28	29
Time: Training Title: Capacity: Contact:		

Thu	Fri	Sat
5	6	7
Time:		
Training Title:		
<b>Capacity:</b> Contact:		
12	13	14
Time:		
Training Title:		
Capacity:		
Contact:		
19	20	21
Time:		
Training Title:		
Capacity:		
Contact:		
		_

26	27	28
Time:		
Training Title: Capacity: Contact:		
Capacity:		
Contact:		

Thu	Fri	Sat
2	3	4
Time:		
Training Title:		
Contact:		
-		
9	10	11
Time:		
Training Title:		
Capacity:		
Contact:		
16	17	18
Time:		
Training Title:		

Capacity: Contact:		
23	24	25
Time: Training Title: Capacity: Contact:		
30		
Time: Training Title: Capacity: Contact:		

Thu	Fri	Sat
7	8	9
Time:		
Training Title:		
Capacity:		
Contact:		
14	15	16
Time:		
Training Title:		
Capacity:		
Contact:		

21	22	23
Time:		
Training Title:		
Capacity:		
Contact:		
28	29	30
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
4	5	6
Time:		
Training Title:		
Capacity:		
Contact:		
11	12	13
Time:		
Training Title:		
Capacity:		
Contact:		

18	19	20
Time:		
Training Title:		
Capacity:		
Contact:		
25	26	27
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
2	3	4
Time:		
Training Title:		
Capacity:		
Contact:		
9	10	11
Time:		
Training Title:		
Capacity:		
Contact:		
16	17	18
Time:		

Training Title: Capacity: Contact:		
23	24	25
Time:		
Training Title:		
Capacity:		
Contact:		
30	31	
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
6	7	8
Time:		
Training Title:		
Capacity:		
Contact:		
13	14	15
Time:		
Training Title:		
Capacity:		
Contact:		
20	21	22
Time:		
Training Title:		
Capacity:		

Contact:		
27	28	29
Time:		
Training Title:		
Capacity:		
Contact:		

Thu	Fri	Sat
3	4	5
Time:		
Training Title:		
Capacity:		
Contact:		
10	11	12
Time:		
Training Title:		
Capacity:		
Contact:		
17	18	19
Time:		
Training Title:		
Capacity:		
Contact:		

24	25	26
Time: Training Title: Capacity: Contact:		

Thu	Fri	Sat
1	2	3
Time:		
Training Title:		
Capacity:		
Contact:		
8	9	10
Time:		
Training Title:		
Capacity:		
Contact:		
15	16	17
Time:		
Training Title:		
Capacity:		
Contact:		
	_	·

22	23	24
Time:		
Training Title:		
Capacity:		
Contact:		
29	30	31
Time:		
Training Title:		
Capacity:		
Contact:		