



UBC BC Cancer Research Ethics Board

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BC Cancer Biobank Utilization Form

This form is used to demonstrate Biobank support and awareness of research being submitted for REB review prior to final approval.

APPLICANT (Principal Investigator):
REB#:
Study Title:
Name of Biobank:
Biobank H#:
The above-named Biobank acknowledges receipt of application for above REB protocol to acquire samples and/or clinical data.
Yes No
And/or:
The Biobank is able to provide services to collect and store samples and/or clinical data as described in the above REB Protocol:
Yes No

Biobank Signature:
Signature Role (deemed appropriate by biobank) Date