



ANIMAL REQUEST FORM

I. PRINCIPAL INVESTIGATOR

Name:

College:

Mobile phone number:

Department:

Email:

II. RESEARCH PROJECT DETAILS

Project title:

Project type:

Starting date:

Ethical approval number:

Funding agency:

Project number:

Ending date:

III. ANIMALS REQUESTED

Species:

Strain:

Total no. requested:

Males (*n*):

Age/weight:

Females (*n*):

Age/weight:

Total no. of animals approved for the project:

No. of animals previously released:

Required date of supply:

Supply:

IV. PROJECT PERSONNEL RESPONSIBLE FOR ANIMALS AFTER RELEASE

Primary personnel name:

Animal handling certification number:

Phone number:

Email:

Emergency contact(s) name and tel.:

STATEMENT OF AGREEMENT

I agree to acknowledge the Animal Resource Center (ARC) in all publications involving animals obtained from this animal request and will inform ARC upon publication for ARC records.

PI name:

PI signature:

Date:

ARC OFFICE USE

Technical staff in charge:

Chief technician remarks/approval:

ARC director remarks/approval:

Date: