**The University of North Carolina at Pembroke**

**APPLICATION FOR APPROVAL TO USE VERTEBRATE ANIMALS IN RESEARCH and TEACHING NEW SUBMISSION**

**Instructions for filling out this form:**

1. All teaching and research protocols utilizing living vertebrate animals must be tendered as New Submissions for complete evaluation by the Institutional Animal Care and Use Committee (IACUC). Applications must also be submitted when utilizing dead vertebrate animals or animal parts if the animal was both sacrificed and procured solely and specifically for the research or teaching purpose. All approved protocols must be re-submitted as a new protocol for review every three years.
2. All grants to be funded by the National Institutes of Health (NIH) must be reviewed *prior to* the release of funding to assure that all procedures on animals are included in an approved IACUC protocol. For this purpose, grant PIs must complete the “GRANT APPLICATION REVIEW FORM” and submit the form to the IACUC Office along with the grant application. The “GRANT APPLICATION REVIEW FORM” asks the PI to identify the IACUC protocols that correspond to the grant application animal work. A review of the grant submission and IACUC protocols will be performed to verify that all animal work has been described and approved by the IACUC. The Office of Research must certify that this review has been conducted before NIH will release grant funding. Therefore, all PIs receiving notice of a fundable score from NIH should contact the IACUC Office as soon as possible to initiate a review.
3. Postdoctoral fellows, graduate students, and undergraduate students may not submit applications as principal investigators and must include sponsorship by an appropriate academic advisor. Please include the sponsor’s name and contact information on the certification page of this application.
4. Work involving radiation must be approved by the Radiation Safety Office.
5. Consultation with a veterinarian prior to application submission is recommended.

**The University of North Carolina at Pembroke**

**UNCP ANIMAL CARE AND USE – NEW PROJECT APPLICATION**

 Application Number:

 Approval Date:

(PLEASE TYPE)

1. *Principal investigator or course instructor:*

1. *Project title or course title / catalogue number:*

1. *List the species to be used by common name:*
2.
3.
4.
5. *Describe briefly but clearly the scientific rationale and scientific objectives (for animal use in research) or the value of the exercise (for animal use in instruction).*

1. *Describe for the layperson the potential benefits to society of this animal use. Be as specific as possible and avoid platitudes.*

1. *Project funding source, (indicate "funded", pending" or “NA” if not applicable)*
2. Status:
3. Government Agency and Branch:
4. Non-government Agency:
5. Industry (specify):
6. Other (specify):
7. *Location of the project:*
8. *Where are animals housed?*

1. *Where will experimentation or instruction take place?*

1. *Are special housing conditions required?* □ Yes □ No

*(Please specify your answer)*

1. *Proposed start and end dates of the project:*

Project Start Date:

Project End Date:

1. *Will this project include in vivo use of the following?* □ Yes □ No

*If yes, what?*

 Radioactive Agents:

 Infectious Agents:

 Carcinogens:

 Mutagens:

 Other Biohazards:

1. *Are special state or local permits required?* □ Yes □ No

*If yes, specify:*

1. *Have they been requested?* □ Yes □ No

*If yes, please document:*

1. *Could this project be accomplished without animal subjects?* □ Yes □ No *If not, explain.*

1. *Will any of the proposed procedures cause more than momentary or slight pain or distress to the animals?* □ Yes □ No

*Important Note: If procedures fall into a category other than observation, breeding, venipuncture, simple injections, or euthanasia followed by tissue/organ collection, then you must answer "YES." The USDA requires investigators to consider non-surgical models or models which minimize potential for pain or discomfort even when alleviated by anesthetics/analgesics.*

1. *If "yes," then explain why you cannot use alternative procedures that cause less pain or distress. Whether or not alternatives exist, you must provide documentation (e.g., literature searches and key words used, etc.) to support your conclusion that you cannot use alternatives.*

1. *Estimate the total number of animals to be used, and the expected number to be used in each experimental group.*

1. *Does this project replicate or closely approximate studies done by others?*

□ Yes □ No

*Important Note: If YES, explain why this study is necessary. If NO, you should be able, if requested, to provide the IACUC with a summary of a literature review to support your answer. If this is a classroom use of animals, each new group of students is considered a new use, and thus this is not replication.*

1. *Justify the species chosen for this study.*

1. *If animals are to be euthanized, what method of euthanasia will be employed, and by whom?*

*Method:*

*Name of person conducting the euthanasia:*

1. *If animals are not to be euthanized, describe their ultimate use.*

1. *Will any individual animal to be used in this project be used in any other project?*

□ Yes □ No

*If YES, identify and explain:*

1. *What are your procedures to avoid or minimize any discomfort, pain, or distress the animals may experience? Please list the names and dosages of analgesics and/or anesthetics to be used for each species of animal under study.*

 *Analgesics:*

 *Anesthetics:*

1. *Please list all personnel involved in the project, including the Principle Investigator, and explain how personnel conducting the procedures on animals are qualified, and have been or will be trained. Please also submit an Animal Research Registration form for all personnel.* *Note that if additional personnel are added later in the project, you will need to submit their names and qualifications on the Minor Change to Protocol Form. Use the tables below, and copy and paste additional templates as needed.*

|  |  |  |
| --- | --- | --- |
| Name (last, first, MI) | Status (Title)(i.e., research coordinator, student researcher) | Role on Project |
|  |  | Supervisor / Researcher |
| a. Describe **procedures to be performed** by this person: |
|  |
| b. Describe **type and extent of experience** person has had with the species / procedures to be used: |
|  |
| c. Describe how this person has been or will be trained, and by whom: |
|  |
| d. List date and source of most recent IACUC training: |
|  |

|  |  |  |
| --- | --- | --- |
| Name (last, first, MI) | Status (Title)(i.e., research coordinator, student researcher) | Role on Project |
|  |  | Supervisor / Researcher |
| a. Describe **procedures to be performed** by this person: |
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| b. Describe **type and extent of experience** person has had with the species / procedures to be used: |
|  |
| c. Describe how this person has been or will be trained, and by whom: |
|  |
| d. List date and source of most recent IACUC training: |
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1. *Include a description of the protocol and provide a schedule for each procedure to clearly outline procedural steps performed upon each animal.*

*[This description should allow the IACUC to understand the experimental course of an animal from its entry into the experiment to the endpoint of the study. Specifically address the following as appropriate: Experimental injections or inoculations, blood withdrawals, surgical procedures, radiation, methods of restraint, resultant effects (e.g., pain or distress, ascites production, etc.), other potential stressors (e.g., food or water deprivation, noxious stimuli, environmental stress), procedures to monitor and minimize distress, experimental endpoint criteria (e.g. list the criteria to be used to determine when euthanasia is to be performed) and expected veterinary care.]*

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UNCP ANIMAL CARE AND USE – NEW PROJECT Certification:

*I, (print your name here)*  *, accept responsibility for assuring that this study will be conducted in accordance with the Animal Welfare Act, the Guide for the Care and Use of Laboratory Animals, applicable federal and state laws and regulations, and the policies of UNCP with regard to the humane care and protection of laboratory animals involved in this study.*

*I understand my obligations and agree to request in writing and obtain written approval from the Institutional Animal Care and Use Committee prior to making any changes affecting the categorization of my animal research protocol, or otherwise significantly changing the protocol, as described in this application. I also agree to promptly notify the Committee, in writing, of any emergent problems that may arise in the course of this study, including adverse side effects.*

*I understand that approval of this project is valid for the first year of the study only and a protocol update must be submitted for projects that continue into a second and a subsequent year. At the end of the third year a new application must be submitted.*

*By signing this application, I verify the information provided is accurate and I will adhere to the Animal Welfare Act, the Guide for the Care and Use of Laboratory Animals, applicable federal and state laws and regulations, and the policies of The University of North Carolina at Pembroke.*

Signature Date

*Postdoctoral fellows, graduate students, and undergraduate students may not submit applications as principal investigators and must include sponsorship by an appropriate academic advisor.*

*Sponsor’s* *name:*

*Sponsor’s contact information:*

 Phone Number:

 Email:

 Additional Information (Optional):