TO BE FILLED OUT BY THE IACUC CHAIR
PROPOSAL NUMBER:
APPROVAL DATE:
ANNUAL REVIEWS DUE:
EXPIRATION DATE:

Gordon State College

Animal Care and Use Committee (GSC-IACUC)

ANIMAL USE PROPOSAL FORM

1. PROJECT DETAILS:

1.1 PROJECT TITLE

1.2 PROJECT START AND END DATES

Maximum of 3 years

START DATE	END DATE

Note: Protocols expire after three years and the submission of a new protocol must occur for renewal.

1.3 SUBMISSION TYPE

Initial ☐
Renewal ☐
Modification ☐

1.4 PRINCIPLE INVESTIGATOR/INSTRUCTOR AND CO-INVESTIGATOR INFORMATION

	NAME	POSITION/DIVISION	PHONE NUMBER	EMAIL ADDRESS
PRINCIPLE INVESTIGATOR/INSTRUCTOR				
CO-INVESTIGATOR/INSTRUCTOR				

The Principle Investigator/Instructor must be a faculty member at Gordon State College.

1.5 PRIMARY FUNDING SOURCE

Please indicated where funding for this project is coming from, including funding provided by GSC.

1.6 PERSONNEL INVOLVED IN THE PROJECT

Please provide a detailed roster of all the individuals who will be working with the animals in the project detailed in the current proposal.

Please note that the Principle Investigator/Instructor is responsible for ensuring that all individuals involved receive the proper training and that the roster is kept up to date.

Appendix B – Amendment to Personnel: This is to be submitted when changes are made to the personnel roster. This form can be submitted directly to the IACUC chair and does not require review by the committee.

Appendix C – Instructor Supervised Courses/Laboratory Related Research: This form is to be submitted when the proposal is associated with work that is to be performed during the laboratory sessions of any course.
Failure to keep the personnel roster up to date with the IACUC chair will result in suspension of the protocol until the amended roster is received by the IACUC chair.
Appendix D – Offsite/Non-Gordon State College Collaborations: This form is to be submitted when the proposal includes work that will be done at another location (fieldwork excepted) and/or in association with collaborators who are not based at GSC. This form only needs to be filled out if part of the work will be carried out at GSC or the GSC faculty member will be involved in the project in more than an advisory role.

PERSONNEL ROSTER

NAME	GSC ID (929 NO.)	EMAIL	PRIMARY PHONE	CELL PHONE

2. STUDY OBJECTIVES

2.1 AIMS AND OBJECTIVES

Please provide a detailed description outlining the objectives of the proposed research/teaching activity using lay/non-technical language. (Box will expand as needed.)

2.2 Significance and Expected Outcomes.

Please provide a detailed statement outlining the contributions that the proposed work will make to the expansion of knowledge in either a teaching or research setting. Must include the rationale for the use of animals. (Box will expand as needed.)

3. Animal Requirements

3.1 Species Information

In the table below, please provide the species to be used, the species characteristics, the number of each species to be used each year. Please indicate the USDA Pain Level Category for the proposed procedures. Please do not use abbreviations for species names, doing so will result in the rejection of your proposal. *Note:* You may only use 300 animals/year for three years (i.e. the total animals used over a three year period may not exceed 900). If more individuals are required, then an amendment MUST be submitted to the committee for revision.

Please see Appendix A for USDA Pain Level categories.

	Species, Strain or Line/ Common Name	Characteristics (age, sex, Weight)	Year	Number of Animals in USDA Pain Level Category				Total # Per Year
				A	B	C	D	
1			1					
			2					
			3					
2			1					
			2					
			3					
3			1					
			2					
			3					
4			1					
			2					
			3					
5			1					
			2					
			3					

3.2 Justification of Species Selection

a. Provide a rationale for the selection of the animal specie(s) that will be used in the project. Describe the biological characteristics of the animal(s) that are essential to the proposed study. Describe any experience with the proposed animal model and methodologies. (Box will expand as needed.)

3.3. Justification of Numbers to be Used

Please justify the number of animals to be used. The number of animals should be the MINIMUM number required to obtain statistically valid results. Include justification of group size through a power analysis when possible. (Box will expand as needed.)

4. Experimental Protocols

4.1 Procedures

Describe the details of any procedures that are to be performed on each animal (e.g. toe-clipping, branding). Describe the time frames and intervals in the order in which each procedure will be performed. Indicate if the procedure will be performed on animals or tissues. (Box will expand as needed.)

4.2 Pharmacological Agents

Describe the use of anesthetics, analgesics, and tranquilizing agents including dose and route of administration. Indicate how animals will be monitored during anesthesia and post-anesthesia recovery, if applicable. (Box will expand as needed.)

4.3 Euthanasia

Describe the methods of euthanasia that will be employed. Please include the way that you will ensure that the animal is dead. (Box will expand as needed.)

4.4 Adverse Effects

Describe in non-technical terms any anticipated adverse effects on the animals well-being if applicable. (Box will expand as needed.)

4.5 State and Federal Assurances for Field Studies

If animals in the wild will be used describe how they will be observed, any interactions with the animals, whether or not the animals will be disturbed or affected, and any special procedures anticipated. If there is the likelihood that a pathogen will be encounter, please describe or cite the decontamination procedures that will be used to eliminate or minimize the spread of disease.

Indicate if federal, state, and/or local/special permits are required and whether or not they have been obtained. If they have already been obtained, please provide the numbers.

4.6 Additional Comments/Notes

5. Certification and Submission

In submitting this form, I, _____ certify the following:

1. The protocol submitted provides a complete and accurate description of all of the proposed uses of live vertebrate animals in this research/educational activity.
2. Any proposed revisions to animal care and use procedures will be PROMPTLY forwarded in writing to the IACUC for review and approval PRIOR to implementation.
3. I agree to abide by all applicable laws, policies, and regulations, including the US Animal Welfare Act, the National Research Council Guide for the Care and Use of Laboratory Animals, any other state, federal or international policies on the humane use and treatment animals for use in scientific research and teaching, and all Gordon State College policies and procedures regulating the humane use of animals in teaching and research.
4. I will comply with all regulations governing the importation, collection and/or maintenance of wild species, including obtaining permits from all applicable regulatory agencies prior to the acquisition of the animals.
5. The information provided in this form agrees with the animal use section of the grant application (if applicable).
6. All procedures involving live animals will be performed under my supervision.
7. I accept responsibility for ensuring that all personnel outlined in this protocol (or subsequent personnel amendments) that will be working with live vertebrate animals are aware of, and will not deviate from, the IACUC approved procedures outlined in this protocol, that they will adhere to the regulations regarding the humane treatment of animals and that they will receive training as required by the IACUC. Personnel will be allowed adequate time to obtain the necessary training for the project and will not begin any procedures with

live animals until they have been successfully trained. All participants will not perform procedures for which they have not been trained.