

# Vertebrate Animal Form (5A)

Required for all research involving vertebrate animals that is conducted in a Non-Regulated Research Site.  
(SRC approval required before experimentation.)

Student's Name \_\_\_\_\_

Title of Project \_\_\_\_\_

## To be completed by Student Researcher:

1. Common name (or Genus, species) and number of animals used.
2. Describe completely the housing and husbandry to be provided. Include the cage/pen size, number of animals per cage, environment, bedding, type of food, frequency of food and water, how often animal is observed, etc.
3. What will happen to the animals after experimentation?

## To be completed by Scientific Review Committee (SRC) BEFORE experimentation

### Level of Supervision Required for agricultural, behavioral or nutritional studies:

- Designated Supervisor REQUIRED. Please have applicable person sign below.
- Veterinarian and Designated Supervisor REQUIRED. Please have applicable persons sign below.
- Veterinarian, Designated Supervisor and Qualified Scientist REQUIRED. Please have applicable persons sign below and have the Qualified Scientist complete Form (2).

The SRC has carefully reviewed this study and finds it is an appropriate study that may be conducted in a non-regulated research site.

### SRC Pre-Approval Signature:

\_\_\_\_\_  
SRC Chair Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of Approval

### To be completed by Veterinarian:

- I certify that I have reviewed this research and animal husbandry with the student before the start of experimentation.
- I certify that I will provide veterinary medical and nursing care in case of illness or emergency.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Email/Phone

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of Approval

### To be completed by Designated Supervisor:

- I certify that I have reviewed this research and animal husbandry with the student before the start of experimentation and I accept primary responsibility for the care and handling of the animals in this project.
- I certify that I will directly supervise the experiment.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Email/Phone

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of Approval

# Vertebrate Animal Form (5B)

**Required for all research involving vertebrate animals that is conducted at a Regulated Research Institution.  
(IACUC approval required before experimentation.)**

Student's Name \_\_\_\_\_

Title of Project \_\_\_\_\_

Title and Protocol Number of IACUC Approved Project \_\_\_\_\_

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**To be completed by Qualified Scientist or Principal Investigator:**

1. Was this a student-generated idea or was it a subset of your work?
  
2. Have you reviewed the ISEF Rules relevant to this project?
  
3. What laboratory training, including dates, was provided to the student?
  
4. Species of animals used: \_\_\_\_\_ Number of animals used: \_\_\_\_\_
  
5. USDA Pain Category designated for this study: \_\_\_\_\_
  
6. Describe, in detail, the role of the student in this project: procedures and equipment they were involved with, oversight provided and safety precautions employed. (Attach extra pages if necessary.)

**7. Attach a copy of the Regulated Research Institution IACUC Approval.** A letter from the Qualified Scientist or Principal Investigator is not sufficient.

**Certification or Documentation of Student Researcher Training**

List Certificate Number or Attach Documentation	Date(s) of Training	
Qualified Scientist/Principal Investigator Printed Name	Signature	Date
IACUC Chair/Coordinator Printed Name	Signature	Date