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| IACUC APPLICATION FOR ANNUAL PROTOCOL CONTINUATION |
| Centre College |
| Institutional Animal Care and Use Committee |
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| **PI NAME:**       | **E-MAIL ADDRESS:**       |
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| **PHONE NUMBER:**       | **PROTOCOL #**       |
| **PROTOCOL TITLE:**       |
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| Instructions: This application is used for the first and second renewal of an approved animal protocol. **Note: The third-year renewal of an approved animal protocol requires submission of a new application for full-committee review**. Please complete this form on your computer, save a copy and return the signed original application to the IACUC Chair (Melissa Burns-Cusato) not later than the deadline date provided on the reminder of expiration letter. Signed Annual Continuation forms may be submitted by any of these methods:* By email attachment of a signed, scanned copy: m.cusato@centre.edu - OR –
* In person: Young Hall 215

If you **do not** wish to renew this project, please check below, complete ONLY items 1-4 below and sign and return the form as instructed above.[ ]  Please close this protocol effective       (insert end date if different from protocol expiration date).If minor modifications to the protocol are required at this time, please complete a Minor Modification Request Application from the IACUC Website (<http://www.centre.edu/academics/academic-affairs-office/iacuc/>) and follow the instructions provided. **Minor modification requests must be submitted separately – no changes to the approved protocol can be made on this form. Major modifications require a full review of a new protocol using the Protocol Application form.** |
| Please provide the following information for protocol renewal: |
| 1. Briefly, state the goal of this research project.

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| **2.** Please describe the progress made on the study to date*.* Include publications, presentations, papers in progress, etc., if applicable: |
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| **3.** Indicate the number of animals involved in approved procedures during the last project year (since the last review): |
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| SPECIES | Number of Animals Used for Research or Breeding Purposes | USDA Pain Category |
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| **4.** Have any adverse events or unanticipated fatalities occurred during the last year of protocol approval? If so, how were they managed and what steps were taken to prevent recurrence?  (Note: Adverse events include pain, distress, and morbidity observed in the study animals.) |
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| **5.** Have any *refinements* been made to the study to minimize potential pain, distress and discomfort in the animals? If so, please describe: |
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| **6.** Were any risks to humans encountered when executing the research protocol?**7.** Please confirm that all laboratory personnel have completed all required training regarding animal handling and procedures; indicate by whom they were trained: |
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| ***For IACUC Use Only:*** |
| **Annual renewal for use of laboratory animals in this protocol has been granted as follows: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  |
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of IACUC Chair or designee | Date |