DIVISION OF RESEARCH & INNOVATION
Research Integrity & Compliance

Institutional Animal Care and Use Committee

Animal Care and Use Protocol Amendment

1. Administrative Information:

Filled out by IACUC Office Only:
Protocol #:
Approval Date:
Expiration Date:

Principal Investigator: **UNT IACUC Protocol Number:**

Project Title:

2. Additional or new funding agency: ☐ Yes ☐ No

Agency:

Grant Identifying #(s):

3. Additional Animals: ☐ Yes ☐ No If Yes, what Species:

Please provide thorough justification for changes in animal numbers or species below. Include related power analysis calculations and provide an updated flow chart that clearly reflects the requested changes.

Used to date: Currently Approved Total

Requested Addition # New Total #

4. Addition or Change in Procedures: ☐ Yes ☐ No

USDA Category (B-E): Cat B

Please provide the rationale behind this change or addition in Procedures description of any new procedures:

Provide a detailed description of the new procedures, including the objectives and timing.

5. Addition or Change in Personnel: ☐ Yes ☐ No

Add/Delete		Name (First, Last)	Role	Experience with species in yrs	Experience with procedures in yrs	Will perform work under supervision
☐	☐					☐
☐	☐					☐
☐	☐					☐
☐	☐					☐
☐	☐					☐
☐	☐					☐

☐ **Ensure all personnel are trained in their responsibilities and have completed the required CITI Training and Occupational Health Enrollment prior to submission.**

☐ **I have provided copies of related permits, IBC approvals, Funding SOW'sspecialized trainings, etc. as applicable**

☐ **I have attached a flow chart with new/updated procedures as applicable.**

Signature of PI **Date**