

RESUMPTION OF ANIMAL RESEARCH REQUEST FORM

Please contact your department head for further instructions.

*1. Department/Unit:

*2. PI's Name:

*3. Approximate date research will begin:

*4. Approximate date research will end:

If travel is necessary to complete the research, indicate the destination below:

5. City:

6. State or Country:

*7. Mode of Transportation

Air

Bus

Car

Van

Other

*8. Please list your projects:

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***9. Total number of researchers involved (faculty, grad students, undergrad assistants, AP's staff). Include the number of each affiliate. Example: (1) faculty (2) graduate students.**

***10. Safety plan: Narrative on your safety plan to preserve the health of all researchers involved in the proposed activity.**