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| **Instructions:** Please answer all questions in the space provided. Submit the complete application as an **MS Word file** and be sure to attach all training credentials for project personnel. Incomplete packages may result in delayed review. Email the application and attachments to JUIACUC@ju.edu  |
| 1. **INVESTIGATOR INFORMATION**
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| Principal Investigator: Click or tap here to enter text. [ ] Undergraduate Student [ ] Graduate Student [ ] Faculty | Email: Click or tap here to enter text. |
| Name of the Faculty Advisor, *if a student is the PI*: Click or tap here to enter text. | Department/Program: Click or tap here to enter text.  |
| Co-Investigators: List the names, role (e.g., student or faculty), and emails of co-investigators and / or individuals authorized to conduct procedures involving animals under this proposal. |
| Do you have experience working with animal models? Please cite publications, (yours and / or others), to support your answer: Click or tap here to enter text. |
| [ ]  I have completed the CITI Training for Animal Care and Use (ACU).  Date of Completion: Click or tap here to enter text. Expiration Date: Click or tap here to enter text.**Note:** Project approvals **will not** be issued until all members of the research team, PIs and Co-PIs, submit a copy of their CITI ACU certificate. To avoid delays, attach certificates of completion in conjunction with your application. |
| **II. PROJECT INFORMATION** |
| a. Title of Project:Click or tap here to enter text.b. Type of Submission: [ ] Initial Submission [ ]  Modification [ ]  Renewalc. Project Type: [ ] Faculty Research [ ] Undergraduate Student Research [ ] Graduate Student Research   [ ] Teaching/Instruction: (Course number: )d. Project Setting: [ ]  JU Lab [ ] Off-Campus Lab [ ] Field Studye. Proposed Start Date: Click or tap to enter a date.f. Method(s) to be used: [ ] Observation [ ] Manipulation  g. Are permits required to access, acquire, and / or handle animals? [ ] Yes [ ] No If yes, include a copy of the permit or type in the permit number: Click or tap here to enter text.h. Does this study involve (check all that apply): [ ] Hazardous Materials (e.g., radionucleides, biological agents, harzardous chemicals or drugs, recombinant DNA) [ ] Animal Surgery  [ ] Animal Pain or Distress g. Is this project supported with any funding such as an internal or external grant, contract, sponsorship or donor gift? [ ]  Yes [ ]  No If yes, provide the following: Name of Grant Program:Click or tap here to enter text.h. Tell us about the animals/species in your project: For the purpose of IACUC oversight at Jacksonville University, the term animal shall include all independent live vertebrate members of the Phylum Chordata, Class Vertebrata (all vertebrates) used in research, education, or testing. Answer all the questions, if not applicable type N/A.* Species to be used (i.e., list the most common scientific name of the vertebrates in the experiment):

 Click or tap here to enter text.* Projected number of animals in the study (i.e., minimum number needed to obtain valid results): Click or tap here to enter text.
* Number of animals to be used (i.e. sacrificed as part of the study): Click or tap here to enter text.
* Indicate whether any animals are species of special concern, threatened, or endangered: [ ]  Yes [ ]  No

If yes, list its category and justify why you need to use it: Click or tap here to enter text. |
| **III.** **PROJECT ABSTRACT:** Add relevant literature, as appropriate. |
| **Note:** The abstract should provide a brief summary of the proposed study, including its purpose, animal procedures and manipulations, the methodology, data analysis, and the study’s significance. Do not exceed 300 words. ***A full proposal should be included or attached to this application***. You can also use Appendix 1: Research Proposal Template to draft your proposal. Click or tap here to enter text. |
| **IV. HUMANE CARE CONSIDERATIONS:** Add relevant literature for each item, as appropriate. |
| **Explain considerations given to the following questions (provide supporting or relevant literature):** |
| a. Justify the use of the animal model selected:Click or tap here to enter text. |
| b. List and justify the source of the animal model you will use:Click or tap here to enter text. |
| c. Have the individuals associated with this project had previous experience with the procedures to be used on the type(s) of  animal(s) that will be used? [ ]  Yes [ ]  No If yes, describe: Click or tap here to enter text.If no, when will the training be completed? Please note, the project cannot begin until the necessary training is verified.Click or tap here to enter text. |
| d. Explain how the number of vertebrates was determined. Numbers should be based on scientific and statistical  requirements to achieve objectives.Click or tap here to enter text. |
| e. Are alternatives to animal use possible for the contemplated project?[ ]  Yes [ ]  No If yes, explain why animal use is required.Click or tap here to enter text. |
| f. Will the outcome of the study involve using euthanasia or sacrifice (does not apply to observational or manipulation studies)?[ ]  Yes [ ]  No * If yes, explain the benefits which warrant the sacrifice of animals. Click or tap here to enter text.
* If yes, indicate the proposed method of euthanasia. If a chemical agent is used, specify the dosage range and route of administration. If the method of euthanasia is not consistent with the AVMA Guidelines for the Euthanasia of Animals, provide scientific justification as to why such method must be used. Indicate the method of carcass disposal. Click or tap here to enter text.

 * If **euthanasia** is to be used, have the individuals associated with this project had previous experience with this type of euthanasia on the type(s) of animal(s) that will be used? [ ] Yes [ ]  No

 If yes, please explain: Click or tap here to enter text. |
| g. NON-DUPLICATION ASSURANCE:* + 1. Briefly explain how you determined that this experiment is not duplicative of previous experiments. Include sources used, if appropriate.

Click or tap here to enter text.* + 1. If this is replicative of previous experiments, describe the necessity to repeat the work.

Click or tap here to enter text. |
| h. Indicate which of the following USDA Federal Animal Welfare Act categories apply to the animals used in this project:[ ]  No pain or distress involved.[ ]  Appropriate anesthetic, analgesic, or tranquilizer drugs will be administered to reduce pain/distress.* If narcotic drugs will be used, please include the source of the drugs and veterinarian contact information.

 Click or tap here to enter text.* List drugs to be administered: Click or tap here to enter text.

[ ]  Procedures may cause animal more than momentary or slight pain or distress. Anesthetic, analgesics, or  tranquilizing drugs will *not* be used. Justification for not using anesthetics: Click or tap here to enter text.  |
| i. Indicate which of the following procedures, if any, will be used during this project:[ ]  Chronic restraints.[ ]  The animal will be anesthetized for tissue collection followed by euthanasia.[ ]  Euthanasia followed by tissue harvest.[ ]  Non-survival surgery (i.e. the animals will not be allowed to regain consciousness following the procedure).[ ]  Single survival surgery (i.e. the animals will be allowed to regain consciousness following a single procedure but not following a second procedure performed at a different time).[ ]  Multiple survival surgery (i.e. the animals will be allowed to regain consciousness following two or more procedure performed at different times).[ ]  Other potentially painful procedures (i.e. experimentally induced trauma or burns, administration of drugs or other  agents that might result in pain or discomfort, etc.). Describe the procedure in detail: Click or tap here to enter text. |
| j. Depending on the animal model used, please describe policies and procedures as they relate to the health of the animal(s):Click or tap here to enter text.  |
| k. Disposition of animals found sick by university personnel or researcher (e.g., fish tanks):[ ]  Call investigator or lab manager[ ]  Contact veterinarian (Vet name and contact information: Click or tap here to enter text.)[ ]  Treat as needed[ ]  Other (specify): Click or tap here to enter text. |
| l. Briefly describe policies and procedures in place in the event of mass morbidity:Click or tap here to enter text.  |
| m. Disposition of animals found dead by animal facility personnel:[ ]  Call investigator [ ]  Necropsy[ ]  Discard[ ]  Other (specify): Click or tap here to enter text. |
| n. Disposition of animals found sick by university personnel:[ ]  Call investigator or lab manager[ ]  Contact veterinarian (Vet name and contact information: Click or tap here to enter text.)[ ]  Treat as needed[ ]  Other (specify): Click or tap here to enter text. |
| o. Final disposition of animals by investigator:[ ]  Euthanasia[ ]  Return to animal resources[ ]  Other (specify): Click or tap here to enter text. |

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| **V. FIELD STUDIES – LIVE CAPTURE AND RELEASE:** Add relevant literature and / or cite personal publications for each item, as appropriate.  |
| * + - 1. Describe methods of capture to be used, including devices to be used, frequency with which these devices will be checked and estimated maximum time animals will be restrained before release.

Click or tap here to enter text.  |
| * + - 1. Indicate where captured animals will be released. If the release is at a site other than the site of capture, please justify.

Click or tap here to enter text.  |
| * + - 1. What are the expected injury and/or mortality rates? What will be done in the case of injury or mortality?

Click or tap here to enter text.  |
| * + - 1. What precautions will be used to minimize injury/mortality?

Click or tap here to enter text. |
| * + - 1. In the event of injury or illness necessitating euthanasia, what method will be used and who will perform the procedure?

Click or tap here to enter text. |
| * + - 1. What precautions will be taken to reduce non-target capture?

Click or tap here to enter text. |
| * + - 1. What marking procedures will be used?

Click or tap here to enter text. |
| * + - 1. If blood or other tissue samples are to be taken, describe the procedures to be used, including number and weight or volume of samples to be taken. Also, describe procedures to be taken to prevent infection and minimize pain or distress, including any drugs that may be used. If narcotic drugs will be used please include the source of the drugs and veterinarian contact information. List your qualifications to conduct the procedures, training you will undertake or the name and contact information of a qualified individual that will perform the procedure, such as a veterinarian.

Click or tap here to enter text.  |
| * + - 1. Describe procedures for monitoring animal health and what parameters will be used to determine health status.

Click or tap here to enter text.  |
| * + - 1. Describe additional precautions taken to ensure the safety of personnel involved.

Click or tap here to enter text.  |
| * + - 1. Will this procedure involve transportation? [ ]  Yes [ ] No

Transportation of animals must conform to all institutional guidelines and policies, and federal regulations. If animals will be transported on public roads or out of state, DESCRIBE the methods you will use to comply with USDA regulations. If animals will be transported between facilities, describe the methods and containers that will be used. If animals will be transported within a facility, include the route and elevator(s) that will be used. If yes, please explain:Click or tap here to enter text. |

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| **VI. ADVANCE PLANNING INFORMATION** |
| a. Are new facilities and/or modifications of existing animal facilities required to accomplish this protocol?[ ]  Yes [ ]  No  If yes: 1. Identify the funding source for the construction and / or renovations.

Click or tap here to enter text.1. Attach a description of the requirements.

Click or tap here to enter text. |
| b. List any hazardous agents (infectious, radioactive, chemical, etc.) that will be used in animals as part of this study and indicate  which, if any, might possibly result in exposure of university personnel or contamination of equipment or facilities. Indicate  any possible zoonotic disease transmission and steps to prevent such transfers (e.g., use of gloves). Click or tap here to enter text. |
| c. List all personnel authorized to handle project animals (e.g., teaching assistants, laboratory managers, undergraduate or  graduate students, research assistants, etc.).Click or tap here to enter text. |
| **VII. UNIVERSITY RESOURCES**  |
| **Does this Project require any JU funds or resources to operate (e.g., course releases, use of space or facilities, use of equipment, including JU vehicles/boats, renovations, on-going equipment maintenance, etc.)?** [ ]  Yes [ ]  No SPECIFY: Click or tap here to enter text. |

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| **VIII. PRINCIPAL INVESTIGATOR ASSURANCES**  |
| By signing this form, I: enter your name here1.) acknowledge and accept responsibility for the technical content and quality of the proposed project. 2.) assure that the project and other professional activities and the University mission are compatible. 3.) acknowledge and accept responsibility for the scientific conduct of this project, and to be bound by the terms, conditions, and reporting requirements of any award agreement which supports this activity and by JU policies. 4.) assure that the research protocol herein is not unnecessarily duplicative of previously reported research.5.) assure that all individuals listed or engaged in this project are authorized to conduct procedures involving animals under this proposal.6.) assure that I have reviewed the pertinent scientific literature and the sources and/or databases and have found no valid alternative to any procedures described herein. 7.) assure that I will obtain approval from the IACUC before initiating any significant changes to this study.8.) assure that I will notify the IACUC regarding any unexpected study results that impact the animals. Any unanticipated pain or distress, morbidity or mortality will be reported to the attending veterinarian, as appropriate, and to the IACUC.9.) assure that I am familiar with and will comply with all pertinent, institutional, state, and federal rules and policies. 10.) understand that any false, fictitious or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. 11.) certify that I have not been debarred or suspended from doing government‐sponsored work.12.) assure that the information contained on this form is true, accurate and complete to the best of my knowledge. |
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**Application Checklist (check all that apply)**

[ ]  Attach a full proposal or complete Appendix 1: The Research Proposal Template (Required).

[ ]  Attach CITI training certificates for all the members of the research team listed in the application (Required).

[ ]  Sign the application (Required).

[ ]  A copy of the permit to work with animals on this project is optional but at a minimum, please include the permit number (see page, 1, Section II(g)).

[ ]  Other documents that support your application for example diagrams, brochures, surveys, etc. (Optional).

**Appendix 1: Proposal Template**

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| **RESEARCH PROPOSAL AND HUSBANDRY:** Add relevant literature and or cite personal publications for each item, as appropriate.  |
| **(a)** **Background:** In this section cite relevant literature that supports why this study is relevant or significant. Click or tap here to enter text.**(b) Project Objectives:** Briefly explain the aim of the study and why the study is important to human or animal health, the advancement of knowledge, or the good of society in language that a layperson can understand. Please comment on whether the study unnecessarily duplicates other studies.Click or tap here to enter text.**(c) Methods:** Describe the sequence of experimental manipulations of tests and control groups. Clearly indicate whether the study is observational in nature or manipulative, and describe any stresses that may be brought about in response to these activities.Click or tap here to enter text.**(c) Rationale for Animal Use:** In this section, explain your rationale for animal use. The rationale should include reasons why it is necessary to use animal models, especifically the aninmal model you have chosen for your study. It should also (a) justify the appropriateness of the species selected (e.g., why the species selected should be the lowest possible on the phylogenetic scale, and (b) justify the number of animals to be used (e.g., the number of animals should be the minimum number required to obtain statistically valid results. Include justification for group size through a power analysis when possible. The number of animals should be based on scientific and statistical requirements to achieve the objectives of the study).Click or tap here to enter text.**(d). Animal Husbandry:** Practices must include feeding schedule, location and brief description of housing. Feeding should be clearly outlined and include type of food, amount, and number of feedings per day. Housing descriptions should include enclosure size, density (number of animals/unit), brief description of enclosure environment (bedding, enrichment etc.) and environmental requirements (lighting, temperature and humidity etc.). Procedures and schedules for cleaning should be listed, as well as emergency contact information and a contingency plan in case of emergencies (inclement weather, power outage etc.). Additionally, briefly state policies and procedures that will be implemented to reduce the risk of disease transfer to humans. Click or tap here to enter text.**ORSP Administrative Review Notes:**I am writing to inform you that your project Click or tap here to enter text. has gone through an initial review by the IACUC administrative team.**STATUS:** Withheld in Administrative Review**RESPONSE REQUIRED:** There are some additional documents and / or information that is required before your project can be reviewed by an IACUC reviewer. Please address the items listed below:Click or tap here to enter text.**IACUC Reviewer’s Explicit Changes:** |