

Concern Regarding Care and Use of Animals

The form is used for expressing concerns of misuse as well as for questions and suggestions for improvement.

Please include a description of the concern, question or suggestion below: Date: _____

If applicable, please identify:

Date and Time of Event:

Place of Event:

Protocol number/Animal number:

Research Investigator's Name:

Additional Person(s) with knowledge of the situation (optional):

Are you willing to be contacted to provide additional information? yes no

Signature/Date (optional):

(Please note that results of the outcome of the investigation/inquiry will be communicated if you provide your name.)

FOR USE BY IACUC:

Investigation/Conclusion (continue on another page if necessary):

Please check one:

Animal Concern(s): This is an animal concern regarding mistreatment or abuse of animals.

Other: This is a suggestion for improvement, a question about a process, procedure or training, or other concern.

IACUC Member Signature:

Forward this form to the Office of Research Compliance, 304 Montana Hall, or the IACUC Chair for review and investigation.