## FORM C

## SAINT JOSEPH'S UNIVERSITY OFFICE OF RESEARCH SERVICES INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE

## RESEARCH CONDUCTED AT COLLABORATING INSTITUTIONS OR FACILITIES

This face sheet must be typed and utilized by Saint Joseph's University investigators who plan to conduct research testing and testing activities involving vertebrate animals at <u>non-Saint Joseph's University sites</u>. Complete this form, submit one copy of the animal protocol approved by the IACUC at the site where the work will be performed, along with the IACUC approval letter. Protocol titles should not exceed two lines of 50 characters each, or in accordance with sponsor requirements.

Date:				
Principal Investigator:				
Protocol Title:				
Protocol # at site where the we	ork will be performed:			
Estimated dates of protocol: F	-rom:		То:	
Location where animals will be	e used:			
Are animals purchased with U	niversity funding sour	rces:		
YES Y I	NO Y			
If yes, please complete the following information:				
Sponsor:				
Grant #:				
SJU IACUC Prime # (if applicable):				
Number of animals charged to this grant: (May not exceed a 3 year period)				
Species/Strain	<u># of animals</u>	<u>Sex</u>	Age	<u>Weight</u>

If multiple funding sources are planned for this research, please attach to this page, a copy of the protocol and the IACUC approval letter(s) for each application.