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 **Offsite Animal Care and Use Protocol**

 (กรอกข้อมูลเป็นภาษาไทย หรือ ภาษาอังกฤษ)

|  |  |  |
| --- | --- | --- |
| Protocol number |  | This section will be filled by theBUU**-**IACUC |
| Date of submission (dd/mm/yyyy) |  |
| Date of approval (dd/mm/yyyy) |  |

**1. Protocol title:**

 (Thai)

 (English)

**2. Principal investigator of the submitted protocol**: *For a student thesis, the principal investigator is the principal adviser and the student is a co-investigator*.

 NameAffiliation

 PhoneE-mail

 Animal use license noExpired date

**3. Co-Investigators:**

 **3.1** NameAffiliation

 PhoneE-mail

 Animal use license noExpired date

 **3.2** NameAffiliation

 PhoneE-mail

 Animal use license noExpired date

 **3.3** NameAffiliation

 PhoneE-mail

 Animal use license noExpired date

**4. Name of inter-institute providing IACUC review**

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**5. Contact person in inter-institute**

 NameAffiliation

 PhoneE-mail

**6. Type of animal protocol:**

  Research: in the field of

  Testing/Monitoring, specify

  Teaching: course title/ level

  Biological production, specify

  Animal breeding, specify

  Other, specify

**7**. **Anticipated protocol period:** From ……….............................. to

**8. Grant proposal:** Please select **ONE** of the following options

**** To be submitted;from

 Amount requested

 Funding period from to

**** Has been submitted;from

 Amount requested

 Funding period from to

**** Received from

 Amount requested

 Funding period from to

**** Other

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Brapha University remains responsible for ensuring compliance with the IACUC’s determinations and with the Terms of its ANIMALS FOR SCIENTIFIC PURPOSES ACT, B.E. 2558 (A.D. 2015) and Ethical Principles and Guidelines for the Use of Animals.

**Approval:**

**BUU-IACUC** **review:**  Approved  Disapproved

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 (Chair, BUU-IACUC) (Date)

**Burapha University**

**Offsite Protocol Format**

**for Permission of Animal Care and Use**

**1. Protocol title:**

 (Thai) …………………………………………………………………………………………...

 (English) ………………………………………………………………………………………..

**2. Non-technical summary**

………………………………………………………………………………………………………….……………………………………………………………………………………………………………….…………………………………………………………………………………………………………….………………………………………………………………………………………………………………………

**3. Objective(s):** Provide goal/specific aim of this project.

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**4. Description of animals:**

|  |  |  |
| --- | --- | --- |
| Common name | Genus and Species | Strain/Stock |
|  |  |  |
|  |  |  |
|  |  |  |

**5.**  **The animals will be housed at:** ………………………………………………………………………………………………………………..

**6. Any additional informations (describe):** ……………………………………………………….………

………………………………………………………………………………………………………...……..

Your signature(s) as Principal investigator (PI) and Co-investigator(s) on this application verify that the information herein is true and correct and that you are familiar with and will comply with the standard of animal care and use established under the ethical guidelines and policies of Burapha University **(**BUU) and Office of the National Research Council of Thailand **(**NRCT).

**Principal investigator:** Name …………….........**.................**...……

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 (Signature) (Date)

**Co-investigator:** Name …………….........**.................**...……

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 (Signature) (Date)

**Co-investigator:** Name …………….........**.................**...……

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 (Signature) (Date)

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**Note: Once this offsite protocol has been approved by inter-institute IACUC**

 **review, please send a copy of IACUC approval document to BUU-IACUC**