Name (printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ phone: \_\_\_\_\_\_\_\_\_\_\_\_

Title of Protocol \_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**This form must be completed for individuals involved in simple animal procedures such as behavioral testing, injections, specimen collection, or euthanasia.**

**Before completing this form you must have passed CITI Laboratory Animal welfare modules Working with the IACUC, Reducing Pain and Distress in Laboratory Mice and Rats, and Working with Rats in Research Settings.**

1. Indicate which procedures you will be conducting: (Note if additional procedures are added at a future date you will need to obtain approval from the IACUC prior to beginning work with the new procedures.  
   \_\_ Behavioral Testing (list specific tests)  
     
     
     
   \_\_\_ injections (identify subcutaneous, intraperitoneal, etc.)  
     
     
   \_\_\_ specimen collections (indicate type of specimens to be collected)  
     
     
     
   \_\_\_ euthanasia (indicate technique used)  
     
     
     
   \_\_\_ other (provide specific information)
2. Indicate what special training (reading articles, hands-on training, and previous experience) that prepares you to conduct these procedures?
3. Supervisor assurance that training has occurred and proficiency has been demonstrated in the above listed techniques  
     
   Supervisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_