**Institutional Animal Care and Use Committee (IACUC)**

**Request for Modification of Animal Housing/Husbandry not Related to Research**

Submit this form with any applicable supplemental forms to eiuiacuc@eiu.edu. To add, remove, or modify species in a protocol, complete the [Housing/Husbandry Modification to Species Form](Proposed%20Housing%20Husbandry%20Modification%20to%20Species%20Form.docx).

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| [ ]  Check this box if there is a change in PI | Original Protocol Number: |  |
| **Principal Investigator/Responsible Party (Note: PI must be a faculty member)** |
| Name: |  | e-mail:  |  |
| Department: |  | Phone:  |  |
| Contact Phone Number in the Event of a Disaster: |  |
| Will PI Duties / Responsibilities change? |
| [ ]  No [ ]  Yes – describe change(s) in detail below: |
|  **Project Information** |
| Title of Project/Course | Project Type: |
|  | [ ]  Instruction [ ]  Display |

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| **Location**   |
| Will the setting or location for housing/husbandry change? |
| [ ]  No [ ]  Yes – describe change(s) in detail below: |
| Will the living conditions (e.g. enclosure type, items in the enclosure, heat and lighting, number of animals in the enclosure, food) change significantly? |
| [ ]  No [ ]  Yes – describe change(s) in detail below: |

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| **Objectives and Justification** |
| Will the purpose for housing the animal(s) on campus changed?  |
| [ ]  No [ ]  Yes – describe in detail and provide justification for the change(s) below: |
| **Animal Care Personnel** |
| Will there be a change in animal care personnel? |
| [ ]  No [ ]  Yes – complete the [Housing/Husbandry Modification to Species Form](file:///%5C%5Ceiuad.eiu.edu%5Cfiles%5CDepartments%5CGradSchool%5CRes%20and%20Spons%5CGrants%20and%20Research%5CJennifer%5CIACUC%5CIACUC%20Forms%5CProposed%20Changes%5CHousing%20Husbandry%5CProposed%20Housing%20Husbandry%20Modification%20to%20Species%20Form.docx) |
| **Other Animal Personnel** |
| Has there been a change in personnel involved other than animal care personnel? |
| [ ]  No [ ]  Yes - List any additional personnel on the[**Animal Personnel Supplemental Form**](file:///%5C%5Ceiuad.eiu.edu%5Cfiles%5CDepartments%5CGradSchool%5CRes%20and%20Spons%5CGrants%20and%20Research%5CJennifer%5CIACUC%5CIACUC%20Forms%5CProposed%20Changes%5CResearch%5CField%5CProposed%20Animal%20Personnel%20Supplemental%20Form.docx) |
| **Species List** |
| Has there been a change in the species used in this protocol, or a change in animal care personnel or number of animals in a species being used? |
| [ ]  No [ ]  Yes – complete the [Housing/Husbandry Modification to Species Form](file:///%5C%5Ceiuad.eiu.edu%5Cfiles%5CDepartments%5CGradSchool%5CRes%20and%20Spons%5CGrants%20and%20Research%5CJennifer%5CIACUC%5CIACUC%20Forms%5CProposed%20Changes%5CHousing%20Husbandry%5CProposed%20Housing%20Husbandry%20Modification%20to%20Species%20Form.docx) |
| **Other Changes:** |
| If there are other changes to this protocol not otherwise specified on this form, please explain below: |
|  |

**CERTIFICATIONS AND ASSURANCES:**

By signing this form, I certify that:

[ ]  The information provided in this application is an accurate description of the proposed use of animals

[ ]  All activities are designed to assure that pain/distress/discomfort of animals is minimized

[ ]  Medical care will be available when necessary, and provided by a qualified veterinarian

[ ]  All personnel authorized to conduct animal procedures under this protocol will be appropriately trained and qualified, and that I am responsible for the supervision, training, and work of said personnel

[ ]  I will obtain IACUC approval before initiating any changes to this protocol by submitting the [Animal Housing/Husbandry Protocol Modification Request](https://www.eiu.edu/grants/Proposed%20Animal%20Housing%20Protocol%20Modification%20Request.docx) form.

[ ]  I will notify the IACUC of any changes to the species list including changes in caretakers, addition or removal of species, or significant change in quantity of any species listed by submitting the [Housing/Husbandry Modification to Species Form](https://www.eiu.edu/grants/Proposed%20Housing%20Husbandry%20Modification%20to%20Species%20Form.docx).

[ ]  I will notify the IACUC regarding any unexpected impact to the animals, and any unanticipated pain or distress, morbidity or mortality will be immediately reported to the IACUC and will submit the [IACUC Incident Report](https://www.eiu.edu/grants/Proposed%20IACUC%20Incident%20Report.docx) form

[ ]  I am familiar with and will comply with all pertinent institutional, state, and federal rules and policies for the ethical use and treatment of animals used in research and teaching

**Submission of this form by the PI in the form of electronic mail is taken as evidence of this Assurance. Please type your name(s) and the date below.**

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| Principal Investigator / Responsible Party Signature | Date |
| *For IACUC Use Only:*  | Date Received: |  | Protocol Number: |  |