Animal Use Protocol (AUP) Personnel Amendment Application

 Use this form to request a personnel change for your current Institutional Animal Care and Use Committee (IACUC) approved protocol. Complete items #1-2. Submit the Amendment Application electronically to Sonal Gadre, Office of Research Compliance & Integrity, (sgadre@ucmerced.edu)

1. General Information:

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| --- |
| AUP #:  |
| AUP Title:  |
| Principal Investigator: |
| Unit:  |
| Phone:  |
| Fax: |
| Email:  |
| Submission Date:  |

2. List personnel changes below (repeat for each personnel):

Name:

Occupation/Title:

Role in project:

Action: [ ] Add [ ] Delete

CITI Training Completed: [ ] Yes [ ] No

Vivarium Training Completed: [ ] Yes [ ] No

Enrolled in Occupational Health and Safety Program: [ ] Yes [ ] No

 Biosafety hazard training: [ ] Yes [ ] No

|  |
| --- |
| Please list procedures this individual will perform and describe the training and experience relevant to the procedures in this protocol:  |