**Universiti putra malaysia**

**Institutional Animal Care & Use Committee**

***Office use only***

***Date received:***

***Date of meet:***

***Final/Annual Report & Application for Continuation***

|  |
| --- |
| *Please use this form to report on the progress or completion of the animal study. Applications for continuation or extension need to be reviewed and approved by the IACUC. Forward the completed form to:*The Secretariat, Institutional Animal Care and Use Committee, c/o Research Management Centre, Level 4, Bangunan Canselori Putra (off Lebuh Silikon), Office of the Deputy Vice Chancellor (Research and Innovation), Universiti Putra Malaysia. Attention to: Ms. Nor Ellia Abd Ajis, email: n\_ellia@upm.edu.my, Phone: 03-8947 1244, Fax: 03-8947 1634 |
|  |
| **Principal****Investigator**  |       | **AUP No.** |  |
| Department |       | Phone  |       |  Fax |       |
|
| Address |  | E-mail |       |

|  |  |
| --- | --- |
| Project Title  |       |
| Funding source |  |

|  |  |
| --- | --- |
| **Check One:**\_\_\_\_\_ A. Proposal was not funded and/or research will not begin. Please close project files**. (Complete and submit this form as a final progress report).**\_\_\_\_\_ B. Funding and/or start of research are pending. Please keep project active. **(Complete and submit this form).**\_\_\_\_\_ C. Research will not continue beyond the anniversary date. **(Complete and submit this form. If research has ended, describe disposition of animals in the box to right).**\_\_\_\_\_ D. Research will continue beyond the anniversary date. **(Complete and submit this form).** | Anticipated end date of research project: |
| Funding source: Project No: |
| Location(s) of animal housing: |
| Location of animal experiments and procedures: |
| Disposition of animals: |

|  |
| --- |
| **Animal Usage** |
| Species | Number approved | Number used  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| Please list the experiments conducted on animals during the past year, and a brief summary of findings/outcome.  |
| Please list the experiments yet to be carried out. |
| **We hereby declare that the care and use of animals has been carried out as described in the approved** **Animal Utilisation Protocol.****Signature and stamp of Attending Veterinarian:**  **Date:****Signature and stamp of Principal Investigator:**  **Date:**   |