Institutional Animal Care and Use Committee (IACUC) iacuc@tarleton.edu
Box # T-0015
(254) 968-1647



Annual Review and Progress Report

Required annual review/status report protocols involving the use of animals. Please complete this form and forward by electronic mail to the compliance coordinators at $\underline{iacuc@tarleton.edu}$

NOTICE: This protocol is due for an annual review. Submission of the annual review form is required to continue approval of this protocol. Therefore, you must submit this report to the IACUC **before your annual expiration date.**

1.	Date:
2.	Principal Investigator:
	Department:
3.	Title of Project:
4.	IACUC AUP number:
5.	Is this project involving the use of live animals <u>active</u> ?
	Yes
	No If no, do you request termination of this approved protocol?
	Yes terminate
	No do not terminate
6.	Check applicable statements below. I request continuation of this protocol without change.
	☐ I request continuation of this protocol with changes as described in detail, including personnel changes
	on the Protocol Amendment Form which I am forwarding to Danielle Perkins at iacuc@tarleton.edu
	☐ I request termination of this protocol. I understand that in order to reinstate this study, a new protocol
	application must be submitted.
7.	Funding source:
8.	Date project started: Expected date of completion:
9.	Species of animal(s) used in project (common name):
10	Number of animals used on this project since last ARPR:
11	. Total number of animals to be used in the project:
12	Provide a brief Status/Progress report indicating what has been accomplished to date:
	As Principal Investigator of this project, I certify that it conforms to all Federal, State and Institutional was and guidelines concerning the use of live animals. The Animal Care and Use Committee will be notified any noncompliance or departures from the approved protocol.
	Name: Date:
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Please forward this completed form **before your annual expiration date** to: IACUC Lack of response could result in freezing of funds for this project.