**PLEASE COMPLETE ALL INDICATED SECTIONS**

**Activities which do not require ethics review by an Animal Use and Care Committee must be registered with the Research Ethics Office by completing this form. These activities include Category A animal use and “Other” animal use activities**.

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| **Applicant Name***: (include supervisor’s name if applicable)* |       | **CCID:** |       |
| **Email Address:** |       | **Telephone Number:**  |       |
| **Title of Activity or Event:**  |  |
| **Activity/Event Location:** |       | **RES #:***(if applicable)* |       |
| **Activity/Event Start Date:***(e.g. September 8, 2014)* |       | **Activity/Event End Date:***(e.g. September 8, 2014)* |       |
| **Species:** |       | **Number of Animals:** |       |
| 1. **IS THIS ACTIVITY RESEARCH OR TEACHING?**
 |
| [ ]  **YES** 🡪 *Please complete only questions* ***2-5****,* ***Category A*** *Animal Use* |
| [ ]  **NO** 🡪 *Please complete only questions* ***6-8****,* ***“Other”*** *Animal Use* |
| **CATEGORY A ANIMAL USE**Experiments on most invertebrates and live isolates are Category of Invasiveness A and do not require ACUC approval. Examples include the use of tissue culture and tissues obtained at necropsy or from the slaughterhouse; the use of eggs, protozoa or other single-celled organisms; experiments involving containment, incision or other invasive procedures on metazoa. Please answer the following questions to determine if your research or teaching is Category A. Please complete all fields in the form with sufficient detail that a determination regarding your animal use can be made. |
| 1. **Does this work involve OBSERVATION of live animals?**

In other words, there is no contact with the animals or interference with or modification of their environment or behaviour. Examples could include use of motion activated cameras or video recorders to observe wild species, bird counting (without use of recorded bird vocalizations), a class tour of the humane society facility, or a demonstration of police dog duties. This also includes analysis of data associated with an approved AUP.  |
| [ ]  **YES**  [ ]  **NO** *If yes, describe:*       |
| 1. **Does this work involve invertebrates (below Class Cephalopoda)?**

e.g.: protozoa, insects, worms, clams, crabs, lobsters, snails, coral, sponges and starfish. The University Animal Ethics Policy defines Animals as: *“Any living non-human vertebrate and any living invertebrate of the class of cephalopdoda, including free-living and reproducing larval forms.”* |
| [ ]  **YES**  [ ]  **NO** *If yes, describe:*       |
| 1. **Does this work involve live isolates?**

e.g.: excreta/parasites collected from live animals, zebrafish embryos, chick embryos at less than 2/3 incubation**, animal cell lines with the source identified**. |
| [ ]  **YES**  [ ]  **NO** *If yes, describe:*       |
| 1. **Does this work involve animal-derived tissues or cadavers?**

e.g.: dead animals found in the wild or tissues obtained from a meat processing plant or dead animals euthanized under an approved protocol. |
| [ ]  **YES**  [ ]  **NO** *If yes, describe:*       |
| ***If you answered yes to question 1 and have completed all fields for questions 2-5, your application is complete.*** |
| **DETAILS OF “OTHER ACTIVITIES”****Animal use that does not involve research or teaching does not generally require ACUC review, however there are other issues which may need to be addressed. Please provide the details of your animal use activity below.** |
| 1. **Description of Event**

e.g.: Bar None parade, petting zoo at University Open House, dog therapy for students at exam time. |
|       |
| 1. **Nature of Animal Involvement**
 |
|       |
| 1. **Emergency Contact(s):**

(List the name and cellular telephone number for at least one person who will be present for the entire duration of the event). |
| Name: |       | Telephone: |       |
| Name: |       | Telephone: |       |
| ***If you answered no to question 1 and have completed all fields for questions 6-8, your application is complete.***  |

**YOUR ACTIVITY ASSESSMENT IS VALID FOR ONE YEAR FROM THE DATE OF ACKNOWLEDGMENT.
IF THE ACTIVITY CHANGES, OR IF YOUR PROJECT WILL CONTINUE BEYOND A YEAR, REO MUST BE NOTIFIED IN ORDER TO RE-EVALUATE THE APPLICATION.**

***Applications should be submitted by email to:*** **REAnimal@ualberta.ca**

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| **REO OFFICE USE ONLY**  |
| **SUBMISSION STATUS:**   |
| [ ]  **Category A Invasiveness** (does not require ACUC review)[ ]  “**Other Activity” Involving Animal Use** (does not require ACUC review)[ ]  **Study Requires ACUC Review** (an animal user protocol must be submitted) |
| **REO REFERENCE NUMBER:**  |       |
| **DATE OF ACKNOWLEGEMENT:**  |        |
| **ASSESSMENT COMPLETED BY:**  |       |