

Institutional Animal Care & Use Committee  
**ATTACHMENT L - PERSONNEL**  
**ANIMAL USE PROTOCOL FORM**



Provide names for all persons (other than ARF staff) who will be involved with the animals on this project. For each person listed, describe his/her experience and training that are applicable to responsibilities on this project. [To be added when on-line training has been purchased – All personnel must have received certification of passing scores on appropriate AALAS Learning Library modules within the past five years with a copy of the certifications on file with the IACUC Administrator.] Use additional pages if necessary.

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1. Name & Bear Number: \_\_\_\_\_

Phone # and Email: \_\_\_\_\_

**Project Responsibilities:** Describe this individual's responsibilities on this project.

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**Training:** Describe the training this individual has or will receive that is related to animal research and to this project. Indicate when the training occurred, who provided the training, and what was covered.

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2. Name & Bear Number: \_\_\_\_\_

Phone # and Email: \_\_\_\_\_

**Project Responsibilities:** Describe this individual's responsibilities on this project.

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**Training:** Describe the training this individual has or will receive that is related to animal research and to this project. Indicate when the training occurred, who provided the training, and what was covered.

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Phone # and Email: \_\_\_\_\_

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Phone # and Email: \_\_\_\_\_

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**Training:** Describe the training this individual has or will receive that is related to animal research and to this project. Indicate when the training occurred, who provided the training, and what was covered.

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5. Name & Bear Number: \_\_\_\_\_

UNC IACUC

Protocol #:  
Form 0708

Phone # and Email: \_\_\_\_\_

**Project Responsibilities:** Describe this individual's responsibilities on this project.

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**Training:** Describe the training this individual has or will receive that is related to animal research and to this project. Indicate when the training occurred, who provided the training, and what was covered.

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Phone # and Email: \_\_\_\_\_

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Phone # and Email: \_\_\_\_\_

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Phone # and Email: \_\_\_\_\_

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Phone # and Email: \_\_\_\_\_

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Phone # and Email: \_\_\_\_\_

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Phone # and Email: \_\_\_\_\_

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Phone # and Email: \_\_\_\_\_

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13. Name & Bear Number: \_\_\_\_\_

Phone # and Email: \_\_\_\_\_

**Project Responsibilities:** Describe this individual's responsibilities on this project.

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**Training:** Describe the training this individual has or will receive that is related to animal research and to this project. Indicate when the training occurred, who provided the training, and what was covered.

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14. Name & Bear Number: \_\_\_\_\_

Phone # and Email: \_\_\_\_\_

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