



**Animal Care Committee**

Phone 403.320.3202 ext. 5751 Fax 403.360.8962  
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www.lethbridgecollege.ca/appliedresearch

**Request to Amend an Approved Animal Use Protocol (AUP)**

*This information is collected under the authority of the Alberta Post-secondary Learning Act and will be used for administrative purposes associated with the review of your animal use protocol amendment. It will be treated in accordance with the privacy protection provisions of Part 2 of the Alberta Freedom of Information and Protection of Privacy Act (<http://foip.alberta.ca/legislation/act/index.cfm>.) Questions about the collection, use or disclosure of your personal information collected on this form can be directed to the Animal Care Coordinator, Centre for Applied Research, Innovation and Entrepreneurship, Lethbridge College, Lethbridge, Alberta T1K 1L6, Phone: 403-330-3202 ext. 5751.*

<b>Principle Investigator:</b>			
<b>Contact Information:</b>			
<b>Project Title: (If applicable, include Course Number)</b>			
<b>Approved Protocol Number:</b>			
<b>Proposed Start Date:</b>		<b>End Date:</b>	

**Complete this form and attach the following to request an amendment to an approved animal welfare protocol:**

1. Provide a rationale for the request to amend your approved protocol. Include a brief summary of the purpose of your project.
2. Provide a brief summary of your currently approved procedures and outline the proposed changes. Reference approved SOPs, where applicable.

**If there are changes from the approved procedure in the SOP(s) that are referenced, the changes need to be clearly outlined in this amendment.**

- a. Indicate the CCAC Category of Invasiveness, and the level of pain or distress expected for each procedure.
- b. Indicate how you plan to address/minimize any increases in the level of invasiveness, or pain or distress expected.
- c. Indicate the CCAC Purpose of Animal Use.
- d. Indicate the number and type of animals required for each procedure. Provide details on group sizes and total numbers required. Indicate whether these are in addition to those already approved.
- e. Indicate any changes to endpoint(s), or state that there are no changes to the endpoint(s).
- f. Indicate any changes to animal handling or housing, or state that there are no changes to the animal handling or housing.
- g. Indicate any changes in personnel, or state that there are no changes to personnel. If there are personnel changes, provide their name, position and relevant animal user training.
- h. Provide information on the location of the animals, or state that there are no changes to the location of the animals. If additional space is required, provide details.
- i. Indicate the fate of the animals.
- j. Indicate any changes in the hazards to staff, or state that there are no changes in the hazards to staff. For any changes in the hazards to staff, a Hazard Assessment Report must be completed and submitted, together with this amendment form to OH&S.





## Declaration

I acknowledge responsibility for the animals and personnel in this project. All students, staff and faculty are/will be trained to conduct the project in a humane and scientific manner. All animals used in this project will be cared for in accordance with the principles outlined by the CCAC and the regulations of the Province of Alberta and the Lethbridge College Animal Care Committee.

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Signature of Principle Investigator

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Date