



UNIVERSITY of WISCONSIN-GREEN BAY

Institutional Animal Care and Use Committee Annual Report Form

INSTRUCTIONS:

Complete and submit this form electronically to the Institutional Animal Care and Use Committee iacuc@uwgb.edu

SECTION A: General Information

1. IACUC Approval Number: _____
2. Project Title: _____
3. Protocol Annual Expiration Date: _____
4. Principal Investigator(s):

5. Co-Principal Investigator(s):

Section B: Protocol Information

- The protocol will continue.
- The protocol will not be continued. The project will be closed. Submit this form to iacuc@uwgb.edu
- Reason for Closing Project:
- Completed
 - Not Funded
 - Discontinued
 - Research never started
 - Other (explain):

SECTION C: Project Information

1. During the past year (check one):
 - The study was not active and no animals were used.
 - The study was active.
2. Total number of animals involved in this study:

Species: _____	Number: _____
Species: _____	Number: _____
Species: _____	Number: _____

Indicate additional species/numbers below:
3. Please provide one of the following as a result of your research:



UNIVERSITY of WISCONSIN-GREEN BAY

Publication, abstract, related papers, articles. If >15 pages, please provide link or attach summary.

Brief summary of work completed to date:

SECTION D: Adverse/Unanticipated Events

1. Did you experience any unanticipated adverse events, complications or incidents?

YES NO

If YES, describe the event and how it was handled:

2. Did you receive any complaints about the research?

YES NO

If YES, describe the complaint and how it was handled:

SECTION E: Investigator Comments

Please provide any additional relevant information that may be of importance to IACUC regarding your project.