**IACUC Notice for Use of Avian Embryos**

* 1. **Contact Information:**

Principal Investigator: Click or tap here to enter text.

Department: Click or tap here to enter text.

Building: Click or tap here to enter text. Room: Click or tap here to enter text.

E-mail: Click or tap here to enter text.

Phone: Click or tap here to enter text.

* 1. **Avian Embryo Use Summary:**

1. Avian Species

Click or tap here to enter text.

1. Maximum Age(s) of Embryos used

Click or tap here to enter text.

1. Age at Which Unused Embryos will be Discarded:

Click or tap here to enter text.

1. Method(s) of Euthanasia:

Click or tap here to enter text.

1. Procedures for humane euthanasia should hatching occur inadvertently:

Click or tap here to enter text.

1. Building and room number(s) where avian embryo use will occur:

Click or tap here to enter text.

* 1. **Investigator Assurance:**

I have read the WSU IACUC “Use of Avian Embryos Policy” and agree to abide by it.

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Signature Date

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*FOR USE BY IACUC OFFICE BELOW\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

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Chair Signature Date

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Expiration Date