

**INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE (IACUC)**

# ANIMAL CARE AND USE STUDENT TRAINING CERTIFICATION (Rev. 09/20/2022)

*This form must be completed by all students prior to their involvement in any animal care and use protocol. A separate form is required for each student and each animal research protocol in which the student participates. The form must be co-signed by the Faculty Investigator and Mr. Edward Beary (beary@geneseo,edu), the Biology Department Environmental Health and Safety Officer.*

**Protocol # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Faculty Investigator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(List only ONE protocol per form)**

**Title of the Protocol: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(List FULL TITLE of protocol)**

**STUDENT CERTIFICATION:**

I hereby certify that I have (please check off when completed):

[ ]  read the animal research protocol listed above

[ ]  completed CITI Laboratory Animal Welfare Course and any other CITI courses requested by my faculty mentor ([www.citiprogram.org](http://www.citiprogram.org)) – attach completion report(s)

[ ]  received complete Safety and Occupational Health training from Mr. Edward Beary, Biology Department Environmental Health and Safety Officer

[ ]  familiarized myself with the PHS Policy Tutorial (<https://olaw.nih.gov/resources/tutorial>)

I further certify that I will not perform animal research without direct supervision until I receive proper training and can competently perform the appropriate procedures.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Printed Name of Student Signature of Student Date*

**SAFETY AND OCCUPATIONA HEALTH OFFICER (Mr. Edward Beary, Biology Department):**

I hereby certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a student who will be working on the

*(Printed Name of Student)*

animal protocol listed above, has received training in Safety and Occupational Health.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Signature of Environmental Date*

 *Health and Safety Officer*

**FACULTY CERTIFICATION:**

I hereby certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a student who will be working on the

*(Printed Name of Student)*

animal protocol listed above, has read the research protocol, completed the required CITI Laboratory Animal Welfare Course(s), and familiarized themselves with the PHS Policy Tutorial. I further certify that this student will not perform animal research without direct supervision until they are properly trained and can competently perform the appropriate procedures.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Signature of Faculty Investigator Date*

**Please submit the completed form with attached CITI course completion report(s) to Anne Baldwin, Director of Sponsored Research, Erwin 221, or baldwina@geneseo.edu.**