

## REQUEST FOR CONTINUING IACUC APPROVAL FORM

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### Part 1 - Administrative Information

#### 1. Protocol Information

Project Title:

#### 2. Contact information

##### 2.1. Principal Investigator (PI)

Name:

Email address:

School:

Department/Unit:

Status: Undergraduate Student  Graduate Student  Faculty  Staff

##### 2.2. Please list current members of the research team:

Name	Email	NU/ Non-NU	School and Dept (if NU)	Name of organization ( if Non-NU)
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## Part 2 - Study Overview

1. Please provide a lay summary of the study purpose and the general research questions/objectives.
  
2. Progress report since the last approval (please explain the progress of the study since the initial IACUC approval or last approval, excluding amendment approvals)

Please select all of the types of research activities that were conducted on this protocol since last IACUC approval (excluding amendment approvals)

- Active collection of data (not animal biological materials or data)
- Active collection and use of animal biological materials or data
- Use of biomedical devices, or drugs, biologics, or chemical agents
- Use of existing data (not animal biological materials)
- Active collection of data (not animal biological materials or data)
- Use of existing animal biological materials

Other (explain):

Please summarize the research activities since last IACUC approval (excluding amendment approvals):

Since the last IACUC approval (excluding amendment approvals), were there any complaints about the research activities?

- Yes    No

Since the last IACUC approval (excluding amendment approvals), were there any unexpected problems or adverse events involving risks to animals?

Yes  No

Since the last IACUC approval (excluding amendment approvals), were there any changes to your study (including study design and/or research procedures, research personnel, study location, etc.)?

Yes  No

### 3. Research activities planned for the next year

3.1 Do you plan to obtain new animals?

Yes  No

3.2 Do you plan to collect new or additional data from current research activities?

Yes  No

## **Part 3 – Proposed Changes to Study Design**

1. Please select ALL the categories of amendment(s) you are requesting.

- Change in Study Title
- Change in Principal Investigator
- Addition of/change in research personnel
- Addition of/change in funding source

- Change to research/study design, methods or procedures (e.g., observations, interventions, collection of biological samples or information, etc.)
- Addition of/change to animal subjects
- Addition of/change to research instruments - please attach the revised instrument/s
- Addition of/change to procedures - please attach all related documents
- Other changes. If yes, please specify

2. Change in Principal Investigator

**Name:**

**Email address:**

**School:**

**Department/Unit:**

**Status:** Undergraduate Student  Graduate Student  Faculty  Staff

3. Please state the reasons you are making amendments to the study.

4. Are any of these changes the result of something that occurred during animal studies or an unexpected event?

Yes  No

5. How will the proposed changes have an impact on the risks to wellbeing of research animals?

**Signature:** \_\_\_\_\_

This page is to be signed by the principal investigator. If the principal investigator is an undergraduate or graduate student, the faculty supervisor must also sign in the lower box.

**Principal Investigator:** \_\_\_\_\_

I certify that the information I provide in this application is correct and complete. I also pledge that I will not change any of the procedures, forms, or protocols used in this study without first seeking review and approval from the Nazarbayev University Institutional Animal Use and Care Committee.

Attestation of Principal Investigator

\_\_\_\_\_  
Name / Signature of Principal Investigator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name / Signature of Faculty Supervisor

\_\_\_\_\_  
Date