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**JAMES COOK UNIVERSITY**

**ANIMAL ETHICS COMMITTEE**

**APPLICATION FOR AN ANIMAL HOLDING/DISPLAY**

***Please email an electronic copy of the application form and proposed animal usage to:*** [**ethics@jcu.edu.au**](mailto:ethics@jcu.edu.au)

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| *Animal Welfare Unit, Biosecurity Qld*  *DAF, Scientific Registration Number: 0013*  *Registered User: James Cook University* | ANIMAL ETHICS NUMBER  *(Office Use ONLY)* | A |
| IF YOUR PROJECT TAKES PLACE INVOLVES:  LABORATORY OR ANIMAL FACILITY WORK: COMPLETE THE ORANGE SECTIONS  FIELDWORK: PARKS, COASTAL WATERS, CATTLE or SHEEP STATIONS, EXTERNAL AQUACULTURE ETC  COMPLETE THE GREEN SECTIONS  IF IT INVOLVES BOTH TYPES OF WORK, COMPLETE BOTH GREEN AND ORANGE SECTIONS  WHEN COMPLETING THE APPLICATION, REFER TO THE AEC APPLICATION GUIDE  ALL RELEVANT SECTIONS OF THE APPLICATION MUST BE COMPLETED  INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPLICANT | | |

**PART 1 – ADMINISTRATION AND COMPLIANCE**

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| **1** | **Title of display/exhibit/holding** |  |

**3 Personnel**

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| **2** | **Conflict of Interest**  Does anyone involved in this project have any actual or potential interest, including any financial interest or other relationship or affiliation, that may affect judgements and decisions regarding the wellbeing of the animals involved? If so, please provide details. |
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**Principal Investigator /Academic Supervisor**

If the Principal Investigator is a student, complete the information below for their Supervisor in the project and the Supervisor becomes the person with ultimate responsibility for the oversight of the project, and so must sign in place of the Principal Investigator in the declaration.

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **3** | **Title first and last names** |  | | | | | |
| **Qualifications** |  | | | | | |
| **Phone** |  | | **Mobile** | | |  |
| **Email** |  | | | | | |
| **Discipline, school or organisation** |  | | | | | |
| **What is your relationship to JCU? 1** |  | | | | | |
| **JC Number (if applicable)** |  | | | | | |
| **Does this project contribute to a higher degree by research?**  If ‘Yes’ provide details of your supervisor and have your supervisor sign the declaration below. | | No | | Yes | If ‘Yes’, which degree (PhD, MSc etc) | |
|  | |
| **Role**  What will be your role in the project? | | | | | | |
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| **Experience**  Outline your experience in the role/experience/species used or outline how you will be trained and supervised until competent. | | | | | | |
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*Indicate if the investigator is currently an* ***E****mployee or a* ***S****tudent of JCU, or a researcher who is* ***N****ot affiliated with JCU. If not affiliate with JCU, provide details of the organisation’s QLD Animal Research Registration including registration number below under the signatures.*

**Academic Supervisor Details (if applicable)**

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| --- | --- | --- | --- | --- |
| **3** | **Title first and last names** |  | | |
| **Qualifications** |  | | |
| **Phone** |  | **Mobile** |  |
| **Email** |  | | |
| **Discipline, school or organisation** |  | | |
| **What is your relationship to JCU? 1** |  | | |

**4 Co-investigators**

Copy and paste more tables if required, or delete tables that are not used.

**Co-investigator 1**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **3** | **Title first and last names** |  | | | | | |
| **Qualifications** |  | | | | | |
| **Phone** |  | | **Mobile** | | |  |
| **Email** |  | | | | | |
| **Discipline, school or organisation** |  | | | | | |
| **What is your relationship to JCU? 1** |  | | | | | |
| **JC Number (if applicable)** |  | | | | | |
| **Does this project contribute to a higher degree by research?**  If ‘Yes’ provide details of your supervisor and have your supervisor sign the declaration below. | | No | | Yes | If ‘Yes’, which degree (PhD, MSc etc) | |
|  | |
| **Role**  What will be your role in the project? | | | | | | |
|  | | | | | | |
| **Experience**  Outline your experience in the role/experience/species used or outline how you will be trained and supervised until competent. | | | | | | |
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**Co-investigator 2**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **3** | **Title first and last names** |  | | | | | |
| **Qualifications** |  | | | | | |
| **Phone** |  | | **Mobile** | | |  |
| **Email** |  | | | | | |
| **Discipline, school or organisation** |  | | | | | |
| **What is your relationship to JCU? 1** |  | | | | | |
| **JC Number (if applicable)** |  | | | | | |
| **Does this project contribute to a higher degree by research?**  If ‘Yes’ provide details of your supervisor and have your supervisor sign the declaration below. | | No | | Yes | If ‘Yes’, which degree (PhD, MSc etc) | |
|  | |
| **Role**  What will be your role in the project? | | | | | | |
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| **Experience**  Outline your experience in the role/experience/species used or outline how you will be trained and supervised until competent. | | | | | | |
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**Co-investigator 3**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **3** | **Title first and last names** |  | | | | | |
| **Qualifications** |  | | | | | |
| **Phone** |  | | **Mobile** | | |  |
| **Email** |  | | | | | |
| **Discipline, school or organisation** |  | | | | | |
| **What is your relationship to JCU? 1** |  | | | | | |
| **JC Number (if applicable)** |  | | | | | |
| **Does this project contribute to a higher degree by research?**  If ‘Yes’ provide details of your supervisor and have your supervisor sign the declaration below. | | No | | Yes | If ‘Yes’, which degree (PhD, MSc etc) | |
|  | |
| **Role**  What will be your role in the project? | | | | | | |
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| **Experience**  Outline your experience in the role/experience/species used or outline how you will be trained and supervised until competent. | | | | | | |
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| **4** | **Duration of project** (more than 3 years can be requested if matched to a grant/funding source) | 1 year | 2 years | 3 years |

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| **5** | **Funding Source** | | | |
| Grant title |  | | |
| Funding Body |  | Duration |  |
| Fund Scheme |  | Value | $ |

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| **6a** | **Approvals, permits and biosafety – Does this project involve:** | Yes |
| Wildlife? |  |
| Endangered or threatened species or populations? |  |

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| **6b** | **If ‘Yes’ to any of the above, indicate whether any additional licenses, permits or approvals are being applied for** (eg OGTR, Biosafety Committee, DEHP etc) |
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| **7** | **Collaborating Organisation(s)**  Provide the names of any organisations collaborating in the project (if applicable) |
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**PART 2 – JUSTIFICATION**

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| **8** | **Display/Exhibit Description:**  Briefly describe the display(s)/exhibit(s) |
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| **9** | **Justification for the use of animals:**  What is the purpose of the display(s)/exhibit(s) |
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| **10** | **Replacement:**  Please explain why you need animals for the project. Are there any alternatives available such as videos? Why are these alternatives unsuitable? |
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**PART 3 – ANIMAL HOUSING, CARE AND HUSBANDRY**

**Facility Manager Application Copy**

If your project takes place in an animal facility, please provide a copy of your AEC application to the Facility Manager before submitting to the AEC to give them an opportunity to comment.

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| **11** | **Research Facilities or Sites:**  Provide details of every location where living animals will be held or where animal procedures will take place. | | | | | | |
| **Laboratory / Facility Work** | | | | | | | |
| **Townsville** | | | | | | | |
|  | Immunogenetics Research Facility | | |  | AITHM Rodent Facility | | |
|  | Small Animal House (Building 86) | | |  | Bush House (Building 70) | | |
|  | Building 87 Labs | | |  | AITHM (Building 47) Labs | | |
|  | Building 28 – Constant Temperature Rooms | | |  | Building 28 Display | | |
|  | Veterinary Precinct – Pens/paddocks | | |  | Veterinary Precinct – Aquaculture | | |
|  | MARFU | | |  | Veterinary Precinct – Turtle Health Research Facility | | |
|  | The Science Place – Ground Level | | | The Science Place – Level 1 | | | |
|  | The Science Place – Level 2 | | |  | | | |
|  | Townsville other (please specify and provide location) | | |  | | | |
| **Cairns** | | | | | | | |
|  | Building E5 – Rodent Facility | | |  | Building E4 – Rodent Facility | | |
|  | Building E1 – Rodent Quarantine Room | | |  | Building E1 – Aquarium | | |
|  | Cairns other (please specify and provide location) | | |  | | | |
| **External** | | | | | | | |
|  | Orpheus Island Research Station | | |  | Fletcherview Station | | |
|  | Lizard Island Research Station | | |  | AIMS | | |
|  | External other (please specify and provide location) | | |  | | | |
| **Fieldwork – For displays that may be taken off campus (Field sites, parks, external properties including farms, animal production facilities, external vet clinics etc)**  Add more rows if required by unlocking the form and cut and paste | | | | | | | |
| **Name/approx. location**  Provide the name or general location of the site eg Gaslight Station, Rogers National Park, Ashmore Reef etc | | **Type of site**  Choose an option from the list that best fits the site (if more than one is | **Specific address or location**  Provide details of the specific location or range eg GPS coordinates, street address, national park | | | **State**  If in Australia, what state is the site in? | **Country**  If not I Australis, what country is the site in? |
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| **12** | **Supply/Source**  Where will the animals be sourced from? |
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| **13** | **Animals and Numbers**  What animal species will be held in each tank/pen/enclosure and how many (approximately)?  Complete the Animal Use Spreadsheet with totals of each (or approximate totals if unable to give exact numbers) |
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| **14** | **Housing/Holding/Transport:**  Describe the type of caging/holding systems to be used for the animals including dimensions, number of animals per unit, bedding, environmental enrichment and environmental conditions.  If the display is mobile or is to be taken off campus, describe the transport that will be used.  If the project uses multiple types of housing for different parts of the project, describe each type including the reason for, and duration of holding in each.  If animals are to be housed individually, provide a reason for this and outline measures to be taken to prevent any stress associated with this social isolation.  **OR**  Provide or refer to an SOP containing the above details (provide a link or SOP reference below) |
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| **15** | **Husbandry, care and feeding:**  Describe the husbandry and care of the animals including frequency of cleaning, type of food/water and frequency of feeding/watering, grooming and other aspects that contribute to the wellbeing of the animals.  Describe how the entry of disease will be prevented eg infection control or quarantine.  **OR**  Provide or refer to an SOP containing the above details (provide a link or SOP reference below) |
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| **Refinement** | |
| **16** | Describe what will be done to ensure the animals are able to meet normal behavioural needs |
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| **Animal Monitoring** | |
| **17** | **How will animal wellbeing be monitored?**  Include the frequency of monitoring, what criteria will be monitored to determine the wellbeing of the animal and wether they are experiencing pain or distress, which aspects of the monitoring will be done by the researcher and which will be done by animal technicians. |
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| **Please provide examples of the animal monitoring records or checklists when submitting this application.** |

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| **Emergency Plans, Medical Care and Intervention points** | |
| **18a** | **Outline what will be done in the case of emergencies such as power failure, fire, etc** |
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| **18b** | **Describe what will happen if an animal is found to be sick or injured or expressing signs of stress related?** |
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| **Fate of animals/method of humane killing** | |
| **19a** | **What will happen to the animals at the end of their time on display/exhibit?** |
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| **19b** | **If animals are to be euthanised because they are seriously injured, how will this be done, where will it take place and who will carry this out?**  Include details of the agent used, concentrations, dose, route of administration  (Refer to the AEC Policy and Guidelines for the Humane Killing of animals use for scientific purposes for acceptable methods)  OR  Provide or refer to an SOP containing the above details (provide a link or SOP reference below) |
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| **19c** | **Could animal tissues be shared with other investigators to replace the use of living animals in their work?** (Replacement/reduction) |
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**PART 5 – DECLARATIONS**

**23 Principal Investigator/Academic Supervisor Declaration:**

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| I declare that:   1. I will provide adequate project supervision, ensure animal health and wellbeing and oversee the conduct of all staff participating in the project such that I will take overall responsibility for all aspects of the conduct of the project; 2. Adequate resources are available for the conduct of the project; 3. I have read the most recent Australian Code of Practice for the Care and Use of Animals for Scientific Purposes and the Animal Care and Protection Act and Regulation. I am aware of and agree to meet the responsibilities set out in these documents; 4. All staff involved in this project have been read this application and appropriate legislation and Code and agreed to meet their responsibilities and directions from the AEC; 5. I will ensure that the scope of monitoring the wellbeing of the animals at all stages of their care and use in the project is clearly outlined and communicated to all parties; 6. I undertake to inform the AEC of any changes to the proposed procedures or details given in this form subsequent to its submission (including change of contact details) by submitting an Amendment Application; 7. I agree to submit the mandatory Animal Ethics Report that will be forwarded to me annually and provide a final report upon completion of the project; 8. This project complies with the policy on Animal Research Ethics within James Cook University; 9. The purpose of this project cannot be achieved by alternatives to the use of animals. | | |
| Name - Principal Investigator OR student’s supervisor) | Signature | Date |
| Name – Academic Supervisor (if PI is a student) | Signature | Date |
| If the Principal Investigator/Supervisor named above is not affiliated with JCU, provide the QLD Animal Research Registration number: | |  |

**32 Dean of College/Delegate**

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| I declare that:   1. I have read the application. 2. I am satisfied that the use of animals is justified on scientific grounds 3. I am satisfied the investigators have the appropriate authority from the organisation, qualifications, experience and resources to carry out this project and meet their responsibilities under the Animal Care and Protection Act and the Code. | | |
|  | | |
| Name | Signature | Date |