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| **Faculty of Health Sciences**  **Animal Research Ethics Committee (AREC)**  **FHS029: Ethics application** **for current or secondary use of animal biological material for research or teaching** | | |
| Use:   1. this form to seek ethics authorisation for the use of animal biological material (especially including historical samples) for research or teaching. (If you collected this material under a UCT-ethics committee authorised protocol, and you now wish to use or re-use this material in a new or follow-up study, you will not need to seek ethics authorisation for its use or re-use, but, if this was collected some time ago you may need to consider whether in today’s context, the ethics authorisation given at the time would have been qualified or denied, and if so, you may need to explain the context in any publication that arises from the new study, or where the material is used in teaching.) 2. [**Form FHS003**](https://health.uct.ac.za/sites/default/files/content_migration/health_uct_ac_za/54/files/FHS003_wmsheet_16%2520Oct%25202021_0.docx) **if your** intention is to kill animals specifically to obtain animal biological material for research or teaching;   All current AREC forms are available on the AREC website <https://health.uct.ac.za/animal-research-ethics> | | |
| **This application must be typed, and one signed completed**  **form emailed to:** [fhsanimalresearch@uct.ac.za](mailto:fhsanimalresearch@uct.ac.za)  FHS Animal Ethics Committee Secretariat  E53 Old Main Building, Groote Schuur Hospital  Observatory, 7700  Telephone: +27 21 605 5677 | **For office use only** | |
| **Application No:** |  |
| Animal Material: |  |
| Species: |  |
| Source: |  |
| Date application received: |  |
| Date application authorised/denied |  |

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| **PURPOSE OF APPLICATION** (Please confirm by ticking below)  (Please indicate whether the plan is to use current or historical animal biological material). |
| **Ethics authorisation for the use of current biological material**  **Ethics authorisation for the use of historical biological material** not collected by you under a UCT ethics committee authorised protocol. |

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| **1.TITLE OF APPLICATION** |  | | | |
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| **2. PRINCIPAL INVESTIGATOR** | | | | |
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| Title (e.g., Prof, Dr, Mr, Ms) |  | | | |
| Forenames & Surname |  | | | |
| Qualifications (e.g., PhD) |  | | | |
| Department /Discipline |  | | | |
| If applicant is a STUDENT please provide name of UCT supervisor |  | | | |
| Email address |  | | | |
| Telephone number |  | | | |
| **2.2 STUDY PARTICIPANTS:** | | | | |
| **Title, First name, Surname** | | | **Department** | **Role** |
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| **3. ANIMAL BIOLOGICAL MATERIAL REQUESTED** | | | | |
| Animal species and strain | |  | | |
| Amount of animal biological material required | |  | | |
| Describe the animal material (max 250 words)  (e.g. tissues) | | | | |
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| **4. SOURCE OF ANIMAL BIOLOGICAL MATERIAL (complete either section A or B)** Please note that an abattoir registration number is required if the animal material is sourced from an abattoir. | |
| **SECTION A** | **SECTION B** |
| **CURRENT BIOLOGICAL MATERIAL** | **HISTORICAL BIOLOGICAL MATERIAL** |
| State the source/supplier of the animal material and where and when it will be sourced. | State the source/supplier of the animal material and where and when it was sourced. |
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| Was the material ethically sourced? (e.g. from a previous approved study etc). Please explain. | Was the material ethically sourced? (eg from a previous approved study etc). Please explain. |
|  |  |
| Was the material obtained with permission (e.g. from the animal owner or the custodian of the samples?). Please explain. | Was the material obtained with permission (e.g. from the animal owner or the custodian of the samples?). Please explain. |
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| Were the material obtained legally (e.g. with the required permits?). Please explain. | Were the material obtained legally (e.g. with the required permits?). Please explain. |
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| **4.1 ANIMALS KILLED**  Briefly explain, if known, **how**, **when**, **by whom**, **and why** the animals were killed. |
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| If **not known**, please provide any information possible to help the AREC determine whether this was **done** **ethically**. |
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| **5. PROJECT SUMMARY** | |
| What is the purpose of the project: |  |
| If research, what is the research question? |  |
| What are the project aims and objectives?. |  |
| Describe the methods and procedures. |  |
| If research, what are the potential benefits expected from the research?  (if applicable) |  |
| If teaching, have alternatives been considered? (if applicable) |  |

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| **6. DURATION OF STUDY** | | | | | |
| Period for which authorisation is required  (must not exceed three years) | | Years |  | Months |  |
| Start date |  | End date | |  | |

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| **7. PURPOSE** (select category) | | | | | |
| Research |  | Teaching/training |  | Other (specify) |  |

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| **8. IF FOR RESEARCH, IS THIS RESEARCH PROJECT FOR DEGREE PURPOSES? (tick** ✓**)** | | |
| **YES** | | **NO** |
| If yes, please specify: | | |
| Type of degree |  | |
| Student’s title, first name, surname |  | |
| Student’s email |  | |

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| **9. PRINCIPAL INVESTIGATOR SIGNATURE** |
| Applicant Signature: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date**\_\_\_\_\_\_\_\_\_\_\_\_**  Co-PI Signature:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date**\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **10. DEPARTMENTAL RESEARCH COMMITTEE (DRC) REVIEW** | |
| **Did the DRC or equivalent scientific committee review this study?** | **YES**  **NO** |
| **Signature of the DRC Chair** |  |

**Please note that the PI must submit an** [**Annual or Final Report**](https://universityofcapetown.submittable.com/submit/178249/fhs004-annual-progress-or-final-report-for-the-2020-cycle) **to the AREC in order to maintain protocol authorisation.**