



Animal Care and Use Program

Satellite Facility Application for IACUC Approval

Proposed Name of Facility

Location of Facility

Proposed Facility Director

Phone number

E-mail

Proposed Facility Manager

Species to be housed and/or used

Number of animals projected to be housed/used (estimated daily census)

Source of funding for operational costs

Care Provider or Technician Staff

Name

Degree/Certification

Animal Care Training

Justifications for establishing this satellite care and/or use facility