|  |
| --- |
| **SECTION A** |

|  |
| --- |
| **Complete Section A and return the form by email to Christine Peterson (****cmp15@cornell.edu****) or David Mooneyhan (****dem23@cornell.edu****)** |
| **1. Identification** |  |  |
| First name(s) | Last name | Cornell Email/NetID |
|  |  |  |
| Title or Function |   | Phone |
|       |  |  |
| College | Department | PI or Supervisor |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **2. Animal contact** |  |  |
| **WHAT SPECIES ARE YOU WORKING WITH?** |  |
|  |  |
| Type of contact | [ ]  Husbandry | [ ]  Blood Collection | [ ]  Anesthesia |
|  | [ ]  Restraint/Handling | [ ]  Injection | [ ]  Surgery |
|  | [ ]  Observation | [ ]  Gavage  | [ ]  Other |
|  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **3. Request for exemption** |  |  |
|  |  |  |  |
|  |
| A proof of previous training/or evaluation by CARE vet must be provided to be exempt from a specific module. Since you need to be trained only for the procedures involved in your protocol(s), you do not have to request an exemption from modules that are not relevant to you. You will not be assigned to these modules. |
| [ ]  I am NOT requesting any exemption. |
| [ ]  I am requesting an exemption from the following module(s): |
| [ ]  Module 3- Rodent Basic Techniques (handling, injection/gavage, blood collection, euthanasia). |
| [ ]  Module 3- Zebra Fish Basic Techniques[ ]  Module 3- Dog Basic Techniques |
| [ ]  Module 4- Rodent Surgery |
|  |
| [ ]  I am providing proof of previous training. | [ ]  I am requesting an evaluation of previous training by CARE vet. |
| Signature of CARE Veterinarian.

|  |
| --- |
|  |

 |
|  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Individual training program** |  |  |
| Based on the information provided, the registrant is assigned to the following training session(s): |
| Modules assigned are: | Date of completion: |
| [ ]  Module 1- Introduction to the Care and Use of Research Animals at Cornell University  |  |
| [ ] Module 3- Basic Techniques |  |
| Rodent:[ ]  Hands-on[ ]  Working w/ the Laboratory Mouse: ALL[ ]  Working w/ the Laboratory Rat: ALL |  |
| [ ]  Zebra Fish: ALL |  |
| [ ]  Hamster: ALL |  |
| [ ]  Dog: Working w/ the Laboratory Dog: ALL |  |
| [ ] Module 4- Advanced Techniques |  |
| [ ] Rodent Aseptic Surgery: ALL[ ]  Post Procedure Care: ALL |  |
| [ ]  AUHSP (Animal Users Health and Safety Program) |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

|  |  |  |
| --- | --- | --- |
| **Notes** |  |  |
|       |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |