## FORM D Record of Animals Acquired and Experiments performed:

## (to be maintained by the Investigator and submitted to member secretary IAEC)

Date of entry	No. of animals acquired (specify species, sex and age)	Name, address and registration No. of the breeder from whom acquired with voucher/bill no.	Date and particulars of order of grant of permission by the committee	Date/period of experiment*	Name and address of the person authorizing the experiment	Certification of the investigator authorizing the experiment that all conditions specified for such an experiment have been complied with (
						Name and Signature of PG student/Research scholar and Research Guide)

\* Experimentation details should be attached with this form

## **EXPERIMENTATION DETAILS**

1. Name of the Investigator

3. Title of research project

2. Name of the Guide

	Date of approval	Species/sex/age	Number o	of animal approved								
5. Details of experiment  Objectives of the study												
<ul> <li>Objectives of the study:</li> <li>Details of protocol followed: (Mention route of administration and blood withdrawal)</li> <li>6. Age and weight range at the time of Initiation of the experiment:</li> <li>7. Age and weight range at the time of completion of the experiment:</li> <li>8. Experimental Endpoint Criteria:</li> <li>9. Rehabilitation (if any):</li> </ul>												
								10. Date	of Termination of ex	xperiment as per IAE	C approval:	
								11. Infec	tious agent used if a	ny give details		
								12. Radi	oisotope used if any s	give details		
										Principal investiga Research scholar	ntor/ PG	Research guide
Name												
Signatui	·e											
Date												