|  |  |
| --- | --- |
| Project Number |  |
| Project Title |  |
| Principal Investigator |  |
| Current Approval Period | DD/MM/YYYY to DD/MM/YYYY |
| Amendment Number and Last updated | Am\_ DD MM YYYY |

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* 1. - Past Amendments

Please list all previously approved amendments as outlined in the approval letters.

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| *E.g.* *Amendment 1. Approved 23/09/2020.** *Add Elvis Presley*
* *Time extension to the 3rd of February 2022*
 |

* 1. – Used Animals up to Amendment Submission

Experimental Animals

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Species  | Strain | Number used this year to date | Cumulative number used for the project | Total number approved for the project |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Total |  |  |  |

Training Animals

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Species  | Strain | Number used this year to date | Cumulative number used for the project | Total number approved for the project |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Total |  |  |  |

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* 1. – Summary of Request(s)

Please tick all that are relevant for this amendment.

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| --- | --- |
| Time Extension |[ ]  Protocol Update |[ ]
| Change in Animal Numbers |[ ]  Addition/Removal of Personnel |[ ]

* 1. - Description and Justification

Please clarify what is being requested, why this amendment is needed and any potential benefits of this change. Where you have requested a number of amendment items, please justify each item requested (excluding personnel changes).

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| *E.g.* *1) Time extension to the 13th of February 2023**We are requesting a one-year time extension for this project. Due to the ongoing COVID-19 pandemic we have been unable to source the mice strains required for this project until 3 months ago. Therefore, progress on this project has been much slower than anticipated. This time extension will allow us to more time to work on the aims for this project.*  |

* 1. - Animal Welfare

Please describe any potential impacts to animal welfare for applicable amendments including whether special husbandry or if an updated monitoring schedule is required.

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| *E.g.**3) Add drug X which will be administered via IP twice weekly for 6 weeks**After consulting the literature and speaking to colleagues who have used drug X before we have noted that there is a transient weight loss of 5% after injection. Therefore, we will monitor the mice 2 hours after the injection and twice daily the day following treatment. We will also provide supplements to the mice both before and after injection to help reduce weight loss. The BRF staff will also be informed when injection is to take place to allow them to assist the researchers with monitoring.*  |

* 1. - Training (For New or Existing Personnel Who Require Training Only)

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| --- | --- | --- |
| Person(s) to be trained | Procedure | Trainer(s) |
|  |  |  |

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3. 1 – Declaration

By submitting this amendment, the Principal Investigator declares on behalf of **all** investigators that they have:

|  |  |
| --- | --- |
| [ ]  (Please tick this box to confirm your declaration) | * Read the amendment and certify the information written to be correct.
* Updated the application for the project to match what is requested within the amendment and agree to continue to act in accordance with the responsibilities as outlined in the application.
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