Complete all sections of this template pertaining to your project requirements. The information provided allows the AEC to determine whether animals used in this project have been justified; that it adheres to the principals of the 3R’s and that the research has been conducted as approved.

1. PROJECT DETAILS:

|  |  |
| --- | --- |
| Indicate the type of report: | [ ]  Annual Report (Omit 9.2 & 11.2)[ ]  Final Report  |
| Project No: |  |
| Project Name: |  |
| Date of Project Approval: |  / / |
| State: |  VIC [ ]  OTHER [ ]  Please name which states\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |

1. RESEARCHER DETAILS:

|  |  |
| --- | --- |
| Principal Researcher: |  |
| School/Section: |  |
| Phone: |  |
| Email: |  |
| Other Researchers: |  |

1. PROJECT STATUS:

|  |
| --- |
| Please indicate the current status of the project: |
| [ ]  Continuing Expected completion date: / / |
| [ ]  Completed Completion date: / /  |
| [ ]  Abandoned for the following reason: |

1. SPECIAL CONDITIONS:

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| If this project was originally approved subject to certain conditions, have these been met? |
| [ ]  N/A | [ ]  Yes | [ ]  No \* NB: If ‘no’, please provide an explanation:  |

1. CHANGES TO PROJECT:

|  |
| --- |
| 5.1 Have any amendments been made to the originally approved project? |
| [ ]  No | [ ]  Yes \* NB: List all Amendment details:  |

|  |
| --- |
| 5.2 Do you propose to make further changes? |
| [ ]  No | [ ]  Yes \* NB: Submit an amendment request to the AEC for approval before implementing any changes. Note: Extensions cannot be granted retrospectively - submit them prior to expiry of approval |

1. TRAINING:

|  |
| --- |
| Provide details of all training undertaken by members of the research team: |
| Researcher Name: |  |
| Technique/Procedure undertaken: |  |
| Trainer’s Name: |  |
| Trainer’s level of experience: |  |
| Advise when and how competency in the technique was tested: |  | Date of Training: |
|  |

1. STORAGE OF DATA:

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| --- |
| Please indicate where you are storing the data collected during the course of this project: |
| [ ]  At my place of work.Details: |
| [ ]  Other location:Arrangements for material held in other locations should be documented (Australian Code for the Responsible Conduct of Research: 2.2.2) |

1. RESEARCH SUBJECTS:

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| Have there been any events that might have had an adverse effect on the animal subjects OR unforeseen events that might affect continued ethical acceptability of the project? Please clearly differentiate between speculation and fact.(Please note it is AEC policy that all unexpected deaths or adverse events are reported) |
| [ ]  No | [ ]  Yes: Provide details: |

|  |
| --- |
| Did the number or type of animals used/involved vary from the number and type approved? |
| [ ]  No | [ ]  Yes: Provide details: |

1. PROJECT SUMMARY AND FINDINGS:

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| 9.1. Provide a complete summary of work done and findings (in lay terms) for the duration of this project. |
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| 9.2 FINAL REPORT: Provide details about how the aims of the project, as stated in the application for approval, were achieved (or not achieved).  |
|  |

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| 9.3 For Laboratory projects: Has the wellbeing of the animals been consistent with that anticipated in the project?  |
| [ ]  N/A | [ ]  Yes | [ ]  No: Provide details: |

|  |
| --- |
| 9.4 List details of all animals involved (eg. handled/trapped) in the study this year. |
| State where handled/trappedeg. Vic For Government reporting purposes please report states separately  | Species name | Common name | AnnualNumber (handled/trapped during year) | Cumulative Totals for project |
|  |  |  |  |  |
|  |  |  |  |  |
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| 9.5. Are any of the animals listed in 9.4 endangered species? |
| State where handled/trappedeg. Vic For Government reporting purposes please report states separately | Species name | Common name | AnnualNumber (handled/trapped during year) | Cumulative Totals for project |
|  |  |  |  |  |
|  |  |  |  |  |
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1. INTENTIONAL / UNINTENTIONAL DEATH OF ANIMALS:

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| --- |
| 10.1 Have any animals died as a result of experimental procedures during the project? |
|  [ ]  No [ ]  Yes \* NB: Provide details: |
| State eg. Vic | Species name | Common name | Annual Numberduring year | Cumulative Totalsfor project |
|  |  |  |  |  |
|  |  |  |  |  |
| 10.2 Have any animals been euthanised during the project? |
| [ ]  No [ ]  Yes \* NB: Provide details of the process |
| State eg. Vic | Species name | Common name | Annual Numberduring year | Cumulative Totalsfor project |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

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| --- |
| 10.3 Have any animals been unintentionally killed during the project? |
| [ ]  No [ ]  Yes \* NB: Provide details: |
| State eg. Vic | Species name | Common name | Annual Numberduring year | Cumulative Totalsfor project |
|  |  |  |  |  |
|  |  |  |  |  |

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| 10.4 If unintentional deaths have occurred, what steps have you taken to ensure further deaths do not occur? |
|  |

1. DISSEMINATION OF RESEARCH (Australian Code for the Responsible Conduct of Research 4.4-4.12)

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| 11.1 Provide details of research dissemination outcomes for the previous year resulting from this project: eg: Community seminars; Conference attendance; Government reports and/or research publications  |
|  |
|  |
| 11.2 FINAL REPORT: How will research project findings be disseminated to peers, colleagues and the wider community? |
| [ ]  Conference papersDetails: | [ ]  Journal article(s)Details: |
| [ ]  Thesis | [ ]  BookDetails: |
| [ ]  Other - *Please explain* | [ ]  None - *Please explain* |

1. FEEDBACK:

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| The AEC requires feedback on:* Difficulties experienced with carrying out the teaching/research project; and/ or
* Appropriate suggestions which would lead to improvements in ethical clearance and monitoring of projects involving animals.
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1. SIGNATURE/S: By signing the report you confirm that the research has been conducted in compliance with the Act; the Code; Federation Guidelines and Standard Conditions of AEC approval

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| --- | --- | --- | --- |
| Principal Researcher: | …………………………………….Print name: | Date: |  |
| Other/Student Researchers: | …………………………………….Print name: | Date: |  |
| …………………………………….Print name: | Date: |  |