|  |
| --- |
| Internal reference #  |
| GW PO # |

**UCSB Animal Resource Center**

**Animal Procurement Form**

**To be completed by PI or authorized staff:**

|  |  |
| --- | --- |
| PI:  | Co-PI: |
| Protocol #:  | Date submitted: |
| Please Select Source: CRL (delivers Tues) JAX (delivers Wed)Import/export/transfer (contact ARC Manager) | Date of delivery:  |
| Per-diem number to charge for census:  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| # Animals | Sex | Species/Strain/Taxa | Weight/Age | Special Conditions1 |
|       |       |       |       |       |
|       |       |       |       |       |

Attach additional sheets as needed.

|  |  |
| --- | --- |
| Housing, individual2 or groups of #:  | Building and room number:  |
| Special instructions or requirements for animal housing and care:  |
| Are any of these animals **irreplaceable** and should therefore receive relocation priority in case of a disaster? No Yes (Please make sure that these animals’ cages are identified)3  |
| Are any of these animals **immunocompromised** and therefore require special housing consideration?No Yes |

|  |  |
| --- | --- |
| ARC staff initials to confirm receipt:  |  |
| Choose one:Animals received in good health Problems with shipment or animals (describe in comments and notify Manager or AV) |
| Comments:  |  |