**Important Instruction**

Environment, Health and Safety (EHS) has revised its biohazards approval process and discontinued issuing approval letters for animal use protocols. Letters of Biohazards Approval will only be issued for a project’s funding source.

To assist with the transition to the new process, Letters of Biohazards Approval previously issued for an active animal use protocol will remain valid until the protocol’s next fourth year renewal with the Research Ethics Office. At the fourth year renewal, investigators must complete and submit this form to identify the active funding source for the animal use protocol previously approved by EHS. EHS will use the information provided to reissue the approval letter for the funding source under the new process with the biohazardous activities involving animals identified as part of the funding approval.

* If at renewal an animal use protocol has more than one identified active source of funding with a Letter of Biohazards Approval, then a separate application must be submitted for each of the approved funding sources.
* If the renewed animal use protocol was unfunded, do not complete this form. Instead, complete and submit an [Application for Biohazards Approval: New Grant](https://www.ualberta.ca/vice-president-finance/media-library/ualberta/vice-president-finance/environment-health-saftey/documents/biosafety/biohazards-approval-application---new.docx).

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| **Part A. Animal Use Protocol Information** | | | |
| **Protocol Title:**  **Research Ethics Office File Number:** | | | |
| **Current Location of Animal Use (Building & Room Number):** | | | |
| **Principal Investigator:** | **Department:** | | |
| **University Telephone Number:** | **University Email Address:** | | |
| **Part B. Awarded Funding** (Supporting Biohazard Activities in Animal Use Protocol) | | | | |
| **Project Title:**  **Research Services Office File Number:** | | | | |
| **Funding Type:** | | | | |
| Departmental Start-up Funds | | Research Contract | | |
| Research Grant | | Academic Industry Partnered Grant | | |
| Other (please specify): | | | | |
| **Funding Agency or Source** (full name, no abbreviation)**:** | | | **Funding Period** (yyyy/mm – yyyy/mm)**:**        to | |
| **Principal Investigator:** | **Department:** | | | |
| **University Telephone Number:** | **University Email Address:** | | | |

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| **Part C. Principal Investigator’s Declaration** |
| I,                               , declare that the research involving biohazards described in the Animal Use Protocol is equivalent to the research undertaken in the Awarded Funding.  All experimental plans, standard protocols, and biohazardous materials used in the Animal Use Protocol are identical to those described and assessed in the Awarded Funding.  There are minor differences in the plans, protocols or biological materials between the Animal Use Protocol and the Awarded Funding. These minor differences are explained in the attached signed letter.  I verify that all information listed on my current EHS Laboratory Registry on the ARISE system is up to date. I acknowledge that if there are any future changes to the research plan, biohazards to be employed, or research personnel, I will notify EHS of said changes through an email sent to <biosafety@ualberta.ca>.  I accept responsibility for ensuring that procedures identified for the Animal Use Protocol and Awarded Funding will be conducted in accordance with the guidelines and protocols established in the University of Alberta Biosafety Guidelines and EHS Animal Safe Work Practices as well as with pertinent provincial, federal and international regulations. In addition, I take full responsibility for ensuring that all personnel involved receive proper safety orientations specific to the research, that all biohazardous waste is properly decontaminated prior to disposal, and that any personnel that may come into contact with the biohazards used are properly informed of the risks and appropriate safety mitigations including available immunizations, if applicable.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature Date (yyyy/mm/dd) |

Please submit the completed form to <biosafety@ualberta.ca>.