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Faculty of Health Sciences Ethics Office for Research, Training and Support
[health-sciences.nwu.ac.za/healthethics](http://health-sciences.nwu.ac.za/healthethics)

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| **AnimCare** Ethics Committee on Animal Care, Health and Safety in Research *(AREC-130913-015)***Radiation Officer Declaration Form for Approval of New Projects*****AnimCare 05-01j, Version 4.10 (Nov 2016)*** |
| **CONFIDENTIAL!** This document contains confidential information that is intended strictly and exclusively for the applicant and AnimCare Committee. Should this document or parts thereof erroneously come in your possession, you are requested to destroy it or to return it to AnimCare without delay. Unauthorised possession, reading, studying, copying or distribution of this material, or any other form of abuse, is illegal and punishable. |
| **NWU Ethics Number: *(once available)*** | Click or tap here to enter text. |

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| General Project Identification |

**Applicant to complete this table BEFORE sending it off for signing.**

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| **Project Head** (Title, Initials & Surname) | Click or tap here to enter text. |
| **Project Title**(see Application Form) | Click or tap here to enter text. |
| **NWU Ethics Number**(see Application Form) | NWU- ???-??-s? |

This form is to be completed by the Radiation Officer, as indicated in the Ethics Application Form.
**Please note!** This form may be filled in and signed electronically, and then converted to PDF (recommended), or printed to complete and signed if not possible.

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| Declarations |

1. Is the facility appropriately authorised and suitable for administering radio-active substances to live animals?

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| --- | --- | --- | --- |
| **Yes** | **No** |  |  |
| [ ]  | [ ]  |  | Type details here. |

1. In your professional opinion, are the associated risks for animal, man and environment of the administration of radio-active substances, correctly described in this application, and is corresponding precautionary measures appropriate and sufficient?

|  |  |  |  |
| --- | --- | --- | --- |
| **Yes** | **No** |  |  |
| [ ]  | [ ]  |  | Type details here. |

1. Are the team members who will be working with the radio-active substances appropriately trained and experienced, or will you ensure that they receive such training before they work with the substances and administer them to any live animals?

|  |  |  |  |
| --- | --- | --- | --- |
| **Yes** | **No** |  |  |
| [ ]  | [ ]  |  | Type details here. |

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| **Professional Registration & Body** | **Qualifications** |
| Click or tap here to enter text. | Click or tap here to enter text. |
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| **Name** (Title, Full Names & Surname) |  |
| Click or tap here to enter text. |
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| **Date** |
| Click or tap to enter a date. | **Signature** |