## Animal Use Request Form Maine Agricultural & Forest Experiment Station

Principal Investigator:					Date of Request:			
Department:		Email:				Phone:		
Cooperator(s):			1	Phone/Ema	ail:			
Grad Student(s):				Phone/Ema	ail:			
Undergrad(s): (# or names if known)					Phone/Email:			
Project/Course Title <sup>1</sup> :								
Please indicate which species you are requesting:					Eq	Equine		Bovine
Note: If you want to introduce a new species to the farm or increase the number of animals on the farm, you must fill out the "Proposal to bring new species to the Witter Farm" form, which is available on the Witter Center's web site (umaine.edu/wittercenter).								
Project/Course Description <sup>2</sup> :								
Total Number of Animals	Requested:							
Animal Use Starting Date	:		Ani	nimal Use Ending Date:				
Is this a multi-year projec	t <sup>4</sup> :					·		
Funding Sources (granting agency or organization—Indicate here if the project is grandfathered and provide grant acct info in account field below): <sup>5</sup>								
<ol> <li>Please provide a project or course title suitable for the college annual report to the university.</li> <li>Please be sure to include special diets, dietary ingredients, management practices, housing requirements, veterinary procedures, drug administrations, milk/meat withholding times, and any marketing restrictions of the animal once the project has been completed.</li> <li>Estimated hours of facility staff time requested for project-specific activities.</li> </ol>								

- 4 Animal use is granted for a one-year period. Multi-year or ongoing projects should be indicated on the initial space request, but still require the submission of an animal use request form each year.
- 5 This information is being collected for the college's annual farm activity report.

**Please note:** University of Maine Online Basic Safety Training and MAFES J.F. Witter Teaching and Research Center Area-specific Safety Training must be completed and documented before any work is conducted in the facilities.

Signature of person requesting animals: Account #: \_\_\_\_\_\_ - \_\_\_\_ - \_\_\_\_ Authorized Dept Fund Program Project