|  |  |
| --- | --- |
|  |  |

**VICTORIA UNIVERSITY**

**ANIMAL ETHICS COMMITTEE**

|  |
| --- |
| **REQUEST FOR CHANGE OF CHIEF INVESTIGATOR TO AN APPROVED PROJECT** |

|  |
| --- |
| **PLEASE NOTE: THE ANIMAL ETHICS COMMITTEE (AEC) MUST APPROVE THE CHANGE OF PRIMARY INVESTIGATOR BEFORE THEY MAY COMMENCE WORK OR TRAINING INVOLVING ANIMALS ON THE APPROVED PROJECT**Investigators have personal responsibility for the welfare of the animals they use and must act in accordance with all requirements of the *Act*, the Regulations, the *Code* and the AEC. This responsibility begins when an animal is allocated to the approved project and ends with the specified fate of the animal at the completion of the project.**Refer to the Code Section 2.4**The AEC must be assured that all personnel working on live animals in this project are appropriately experienced, or will be adequately trained and supervised in the techniques described. A global statement of experience with animal related techniques e.g. "10 yrs experience" is not sufficient.  |

|  |
| --- |
| **Forwarding Details** |
| All hard copy applications to be delivered to:**The Victoria University** **Animal Ethics Committee**Research Services Victoria UniversityPO Box 14428 Melbourne VIC 8001**Or** deliver in person to:Research Strategy, Policy and Infrastructure Research ServicesBuilding C, Room C302 Footscray Park campus. | Electronic applications are to be forwarded to **The Victoria University** **Animal Ethics Committee:**E-mail: aeec@vu.edu.au |

|  |
| --- |
| **SECTION 1 ADMINISTRATION** |
| **1. AEC approval details.** |
| Project Title |  |
| AEC Number |  |
| Current Chief Investigator | ………………………*(Name) (Signature) (Date)*  |
| Approval Period | \_ \_/\_ \_/\_ \_ \_ \_ To \_ \_ /\_ \_ /\_ \_ \_ \_ |

|  |
| --- |
| **SECTION 2 JUSTIFICATION FOR CHANGE OF CHIEF INVESTIGATOR** |

2.1 NAME OF NEW CHIEF INVESTIGATOR:

 (Please note a new Chief Investigator is responsible for emergencies)

……………………………………. ……………… ...........

*(Name) (Signature) (Date)*

* 1. REASON FOR THE CHANGE IN CHIEF INVESTIGATOR:

* 1. PROPOSED ROLE OF THE NEW CHIEF INVESTIGATOR IN THE PROJECT?

Indicate if the new Chief Investigator will be involved in day to day, weekend and after hours monitoring and if they will be responsible for monitoring during or after surgery or other invasive procedure (see section 3.3.7 of Application for Approval to use Animals in a Research/Teaching Project). Indicate which procedures they will engage in (e.g. surgery, injections, humane killing).

.

* 1. WHAT EXPERIENCE IN THE TECHNIQUES REQUIRED FOR THE PROJECT DOES THE NEW CO-INVESTIGATOR HAVE? IF NECESSARY, WHAT TRAINING WILL BE UNDERTAKEN AND WHO WILL BE RESPONSIBLE FOR THE SUPERVISION?

|  |
| --- |
| **SECTION 3 – NEW CHIEF INVESTIGATOR** |
| Name (Title, given name, family name) |  |
| Qualifications |  |
| Department/School |  |
| Position |  |
| Number of years of experience working with animals |  |
| Mobile Number (for emergency use only) |  |
| Internal Telephone No. (direct contact number) |  |
| Internal E-mail address |  |
| **INVOLVEMENT IN THE PROJECT** |
| Will you be carrying out techniques/procedures on live animals? | **[ ]** YesIf yes, complete details below. |
| **[ ]** No If no, details of expertise are not required.  |
| For each species and each technique/procedure, give the number of times it has been performed by the named investigator. If less than 10 times, please complete the arrangements for training section below. |
| Species | Technique/Procedure | Approximate number of times this person has performed this technique/procedure in this species. |
| <10 | 10 - 20 | >20 |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **ARRANGEMENTS FOR TRAINING**For each species and technique, nominate the person/s who will provide training and describe the level of expertise of that person. |
| **Name(s) of trainer** |
| Species | Technique/Procedure | Approximate number of times this person has performed this technique/procedure in this species. |
| <10 | 10 - 20 | >20 |
|       |       |       |       |       |
|       |       |       |       |       |
| Trainer(s) Declaration: I/We have the relevant expertise and I/We accept responsibility to train and supervise the above person until I/We consider them to be competent in the necessary procedures.Trainer(s) signature: Date:       |

|  |
| --- |
| **SECTION 4 – CHIEF INVESTIGATOR DECLARATION** |
| I hereby declare that:1. I have read Part III of the *Prevention of Cruelty to Animals Act 1986* (the *Act*), the Regulations 2019 and the current version of the *Australian Code of Practice for the Care and Use of Animals for Scientific Purposes* (the *Code*), and accept the responsibilities detailed therein.
2. I accept responsibility for the conduct of all experimental procedures detailed in this application, in accordance with requirements of the *Act*, Regulations, the *Code*,the Animal Experimentation Ethics Committee.
3. I have listed each person engaged in this project under Section 4 and consider that they have the qualifications, experience and training appropriate for their role in the project; and that they are competent to perform procedures described to the extent of their role. If any person is not already skilled in the procedures, I will ensure that they obtain all necessary training in advance of performing any procedure independently. All personnel have been made aware of their role and responsibilities in this project, and have been given copies of all necessary documentation.
4. The Animal Facility Manager has been made aware of requirements for this application.
 |
| **New Chief Investigator’s Name** | **New Chief Investigator’s Signature** | **Date** |
|  |  |  |