SPONSORED PROGRAMS PROTOCOL CERTIFICATION FORM

Cayuse SP Proposal #:	
Cayuse SP Project #:	

PI Last Name:		PI First Name	∌:		
Phone #: Em			ail:		
Department:		<u>.</u>			
Title					
Title:					
Project Period From:	Through:	Sponsor:			
Does this project involve Verteb	rate Animals? Yes	No			
Associated IACHC Protocolor	Approval Date: Exp	iration Date: No	tes:		
Associated IACUC Protocols:	Approvar Date. Exp	mation bate. No	ies.		
		•			
		•			
Principal Investigator Cortific	ation: I cortify the protocol	a listed above are ann	round by the LIC Davis Institut	ional Animal Cara	
Principal Investigator- Certific and Use Committee (IACUC) for ve					
project's scope of work, and no ac	lditional protocols are pending	or currently anticipated	for this project. I further certify t	hat I will notify the	
ACUC of changes to this project that	affect these protocols.				
		•			
Signature, Principal Investigator		Date			
Does this project involve Huma	n Subjects? Yes No				
Associated IDB Dystocolor		= .			
Associated IRB Protocols:	Approval Date: Exp	iration Date: Note	s:		
Principal Investigator- Certifica	ation: I certify the protocols	isted above are approve	d by the UC Davis Institutional F	Review Board (IRB)	
for this specific project, at the time					
protocols are pending or currently a these protocols.	nticipated for this project. I ful	ther certify that I will not	ity the IRB of any changes to this	s project that affect	
p					
Signature, Principal Investigator		Date			

Submit your complete document to the responsible office

Deliver/ mail this form with your Sponsored Programs paperwork via one of the options below:

Sponsored Programs*
 1850 Research Park Drive

Davis, CA 95618

- * After-hours drop mailbox is located in front of building
- 2. E-mail proposal documents for SPO processing to proposals@ucdavis.edu. E-mail award documents for SPO processing to awards@ucdavis.edu.