	Company: CHM Alliance Pty Ltd	Issue date: 26 November 2018
	Document: 42 AEC Poultry Training Project Proposal V2.doc	Authorised: Quality Manager
	Poultry Training Project Proposal to Use Animals for a Scientific Purpose	

1. Name of Project:

This form is to be used for submission to the CHM Alliance Pty Ltd Animal Ethics Committee (AEC) for poultry teaching/training.

Important Notices

The 'Applicant' is the entity submitting this proposal.

The CHM Alliance Animal Ethics Committee (AEC) deems the applicant to be in charge of the project and to be responsible for:

- The conduct of the project in accordance with AEC approval, the *Animal Care and Protection Act 2001*, the *Australian code for the care and use of animals for scientific purposes, 8th Edition 2013* (the Code) and all other relevant Commonwealth and State legislation.
- The submission of all necessary reports, notices and advices as required by the AEC.


As an AEC approval is not transferable, it may not be appropriate for an employee of an external entity (eg a company or institution) to be the applicant. If an employee is the applicant and leaves the company or institution, the company or institution cannot continue to use the approval.

Investigators and trainers involved in the scientific use of animals have personal responsibility for all matters related to the wellbeing of the animals they use and must act in accordance with all requirements of the Code. This responsibility begins when an animal is allocated to a project and ends with its fate at the completion of the project. Investigators and trainers involved in the scientific use of animals have an obligation to treat animals with respect and to consider their wellbeing as an essential factor when planning and conducting projects.

All text boxes will expand automatically to accommodate entry. Do not remove/alter formatting, headers or footers. Any changes/deletions to headers, footers or formatting may result in the proposal being declined and returned to the applicant.

All pages must be submitted electronically in Word format to your AEC contact. For the last page – Section 8 Declarations – either insert a digitised signature or fax a signed hard copy to the AEC Administrator on 07 3806 4993.

AEC USE ONLY			
Proposal Reference Number:		Date Assessed:	
Assessment Category: (cross one box only)			
<input type="checkbox"/> Approved as submitted			
<input type="checkbox"/> Approved subject to modifications / clarification			
<input type="checkbox"/> Amend prior to resubmission			
<input type="checkbox"/> Pending			
<input type="checkbox"/> Rejected			
Signature of Chair:			
Initials of Members			
Category A:	Category B:	Category C:	Category D:
Monitoring concerns:			

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2. Accredited course/subject title and code

(Please also attach course outline and list of units of competency to be delivered)

3. Applicant details - Applicant's contact person details

Company:		
Name:		
Address:		
Relationship to Applicant (eg employee, consultant, vet etc):		
Phone:	Fax:	E Mail:

4. Dates and Duration of Training

Start Date: **End date:** *(3 years max duration)*

5. Categorisation of teaching/training and research uses of animals

All animal use activities have been allocated to a category to indicate the activity and impact on animals. Please tick the approval category that applies to this proposal.


Approval Category	Type of Project	Type of Procedure
1	Non-research	Normal husbandry procedures
2	Teaching activity with low impact on animals	Demonstration of vaccination
3	Teaching activity with greater impact on animals	Demonstration of poultry euthanasia

Estimated numbers of birds to be used for training:	
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Systems in place to ensure normal husbandry practices are followed:

6. Collaboration

Does this project involve collaboration with external agencies (eg. institutions, companies, individuals etc.)?

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- Yes (If yes complete Section 6)
 No (If no go to Section 7)

Name of collaborator(s) / relevant institution or organisation:

Details of the collaboration


Details of any applications to, and approval from, other institutional Animal Ethics Committees

(Please attach a copy of the application submitted and notification of approval from your collaborator's AEC)

7. Funding

Identify the principle source of funding for this project:

Nature of the funding source ie CHM Alliance company funds, External Agency, External Grant, Commercial, Private, Other:
Name of Funding body/source:
Commercial-in-Confidence Yes/No:
Exact title of funding application:
1 st Named Investigator on funding application:
Administering Organisation/Institution:
Date of submission of application:
Period of funding:
Does the animal work described in the funding application correspond exactly to that described in this animal ethics application, including experimental groups and animal numbers? Yes / No

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8. Declarations

Title of Project: Repeat here as this page is sometimes faxed separately with all signatures.

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Applicant

I, being the applicant or its duly authorised agent, assure the AEC that:

- Adequate resources will be available to undertake the project
- I and all others involved in the project are familiar, and will comply with the requirements of the Animal Care and Protection Act 2001, the *Australian code for the care and use of animals for scientific purposes, 8th Edition 2013* and all other relevant Commonwealth and State legislation
- I and all others involved in the project will adhere to all requirements of the AEC including the provision of reports, notices and advices

Name:	Position:
Signature:	Date:

Project Personnel


We the undersigned assure the AEC that:

- I am familiar with, and will comply with the requirements of the Animal Care and Protection Act 2001, the *Australian code for the care and use of animals for scientific purposes, 8th Edition 2013* and all other relevant Commonwealth and State legislation
- I will adhere to all requirements of the legislation and will comply with requirements of the AEC
- I am qualified and approved to conduct this training

Name:	Position:
Signature:	Date:

Name:	Position:
Signature:	Date:

Name:	Position:
Signature:	Date:

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