Certification of Delivery of a PI-Directed Wildlife Training Synopsis

ynopsis Title:
Protocol Number:
Certification
I,
The Animal Behavior Society if applicable, any provincial or federal regulations that apply and the applicable Animal Care Committee.
Signed:
Date:
Signature Witnessed By:
Date:
I, the Principal Investigator on the above protocol hereby certify the above-named person has received appropriate training and is capable of handling and performing the necessary procedures on the animals identified in the syllabus as required.
PI Name:PI Signature:
Date:

Signed copy of this Certification must be forwarded to the Laboratory Animal Training Coordinator at the University of Manitoba:

Ms. Denise Borowski Fax: 204 789-3914 Phone: 204 789-3960 E-mail: autp@umanitoba.ca