Texas A&M University – Commerce IACUC Project Closure Form

Instructions: Complete this form when an approved animal care and use research project is CONCLUDED or CANCELLED. Please send completed and signed Project Closure Form to ResearchCompliance@tamuc.edu in the Office of Research & Sponsored Programs. Whenever possible, please send this form as soon as the project is complete.

IACU	AUP Number:		
Princi	oal Investigator:		
Email:			
Depai	tment:		
Project Title: Phone:		Phone:	
Faculty Advisor (if applicable):			
1.	Date of Closure:		
2.	Reason for Closure		
	☐ Data collection complete		
	\square Graduation of student investigator		
	☐ Principal Investigator no longer with University		
	☐ Sponsor funding closure		
	☐ Other (please specify):		
	other (pieuse speeny).		
3.	Protocol		
	List animal species used under this protocol. Have there been any significant changes to the		
	number or treatment of animals under this protocol? If so, provide explanation.		
		·	
4	Advarce or Anticinated Events, Describe advarce or unanticina	ated events in this study that have	
4. Adverse or Anticipated Events: Describe adverse or unanticipated events in this s not already been reported to the IACUC.		ated events in this study that have	
	Description:		
	Description.		
5.	Any Comments from PI:		
Signatu	re of Principal Investigator	Date	
	pr		