

Date of request: _____

Requisition Number: _____

Animal Requisition Form

Supervisor's Name & Contact no.: _____

Student's Name: _____

Reg.ID: _____

Nature of research project: Institutional / Collaborative

If collaborative, state the name of Organization:

Date of commencement: _____ Proposed date of completion: _____

Institutional Research Ethics committee (IREC) approval number & date: _____

	Requested	Issued (Official Use only)
Number of animals		
Weight/age range		
Gender		

Approved By:

1. **Dr. Mahtab Ahmad Khan** Associate Professor
Incharge Animal House

2. **Requisition approval**

3. **Finance Approval**

Mr. Mueen Ch., Assistant Professor
Coordinator Animal House

Mr. Zeeshan Akbar Assistant Professor
Coordinator Animal House