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: ________________

<table>
<thead>
<tr>
<th>Number of animals</th>
<th>Requested</th>
<th>Issued (Official Use only)</th>
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<td>Weight/age range</td>
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<td>Gender</td>
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Approved By:

1. Dr. Ali Sharif  Assistant Professor
   Incharge Animal House

2. Requisition approval

Mr. Mueen Ch.,  Assistant Professor
Coordinator Animal House

3. Finance Approval

Mr. Zeeshan Akbar  Assistant Professor
Coordinator Animal House