**THE SECRETARY’S ANIMAL CARE AND ETHICS COMMITTEE**

**(SECRETARY’S ACEC)**

**NOTIFICATION OF PROPOSED EDUCATIONAL ACTIVITY**

|  |  |
| --- | --- |
| **Name of Principal Investigator** |  |
| **Title of Project** |  |
| **Project Number** |  |

**1. Personnel**

**a). Approved Associate Investigator(s) and Other Participants involved in this course – already listed on the Animal Research Authority**

***Associate Investigators*** *are trained and experienced in the procedures used in the project and do not need supervision by the Principal Investigator.*

***Other Participants*** *are people, such as volunteers or employees, without training or experience in the procedures but are directly supervised by the Principal or Associate Investigators and may be receiving training in animal teaching/research techniques and animal handling.*

*If an Associate Investigator is not already listed on the Animal Research Authority (ARA) for this project, please submit a Modification Application for ACEC approval to add them. If you wish for an Other Participant to be listed as an Associate Investigator once they are competent, please submit a Modification Application.* *The template for this can be found under Secretary’s ACEC Forms on the* [*Secretary’s ACEC website.*](https://www.dpi.nsw.gov.au/about-us/science-and-research/animal-ethics-committees/secretarys-animal-care-and-ethics-committee)

|  |  |  |
| --- | --- | --- |
| **List of Associate Investigators and Other Participants involved in this course that are already named this project’s ARA** | | |
|  |  |  |
|  |  |  |

**b). Tutors**

|  |  |
| --- | --- |
| **Tutor Name** | **Qualification** *(if not already provided in the approved application)* |
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|  |  |

**c). Other Participants not named on the project ARA that are involved in delivering this course and may be helping to undertake teaching procedures and/or handle animals and will be directly supervised by the Principal or Associate Investigators.**

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| --- | --- | --- |
| **Name** | **Brief description of activities undertaken under supervision** | **Supervisor(s)** |
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**d). Subcontractors not named on the project ARA participating in delivering who have their own ARA through the Secretary’s ACEC, and their ARA covers the teaching procedures they are being subcontracted to undertake in this course** (if not, they need to be added as an Associate Investigator via a Modification Application).

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| **Name** | **ARA Number (if applicable)** | **Brief description of activities undertaken** |
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**2. Location of school/course:**

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**3. Activities to be carried out (e.g., AI, Ultrasound training etc)**

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|  |

**4. Date of school/course:**

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|  |

**5. Number of participants:**

|  |
| --- |
|  |

**6. Number and source of animals**

|  |  |  |
| --- | --- | --- |
| **Species of animal** | **Number** | **Source** |
|  |  |  |
|  |  |  |

|  |  |
| --- | --- |
| **Principal Investigator signature** |  |
| **Date** |  |

Return Email: [secretary.acec@dpi.nsw.gov.au](mailto:secretary.acec@dpi.nsw.gov.au)