



**Proposal #:**  
**Approval Date:**  
**Expiration Date:**

## **Waiver of Institutional Animal Care and Use Committee (IACUC) Full Proposal Review for Wildlife Observational Studies in Natural Habitat**

**Submit completed forms and questions to: [iacuc@uwgb.edu](mailto:iacuc@uwgb.edu)**

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**Principal Investigators:** Complete the following information to request a waiver of Animal Care and Use Committee full proposal review and approval if your proposal consists of simple unobtrusive observation of wild animals in their natural habitat.

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**1. Title of Project:**

**2. Principal Investigator/Project Director:**

Name:

University Department:

Mailing Address:

Office telephone number:

E-mail Address:

If Student, faculty advisor:

**3. Other individuals authorized to observe animals under this waiver:**

**4. Proposed dates of study:**

**5. Funding Source:**

6. Will your study involve capture or procedures on free-ranging animals in their natural habitats?

NO

YES

**If yes, stop – a full animal care and use proposal and IACUC approval is required.**

7. To the best of your knowledge, will your study cause harm to any animals?

NO

YES

**If yes, stop – a full animal care and use proposal and IACUC approval is required.**

8. To the best of your knowledge, will your study considerably impact the behavior of any animals?

NO

YES

**If yes, stop – a full animal care and use proposal and IACUC approval is required.**

**9. Please provide a short description of your project including target species and methods used to observe them. Include enough detail to justify a waiver of full proposal review by the IACUC.**

***INVESTIGATOR SIGNATURE:***

**To the best of my knowledge, I certify that the information provided in this Request for Waiver is complete and accurate. I understand that any change in the study that introduces direct researcher-animal contact will require prior submission of a full proposal and approval of the IACUC before proceeding. I understand that consultation with the attending (institutional) veterinarian is available to me.**

**I also acknowledge that I have completed required training prior to submitting this wildlife waiver request.**

I further acknowledge that certain free-ranging species are endangered, threatened, or are of an otherwise special status such that required permits, clearances, or other permission must be obtained prior to proceeding with work. I will verify if target species for this project are listed as threatened, endangered, or of other special status at the state, federal, or international level prior to beginning work. For any such listed species I will abide by all pertinent regulatory requirements, including securing all required permits, clearances, or other permissions prior to the commencement of work. I understand that this waiver does not supersede or substitute for any such permissions.

**Principal investigator signature:**

**Date:**

**If student, faculty advisor signature:**

**Date:**

**FOR COMMITTEE USE ONLY:**

**Administratively reviewed and approved by:**

**Date:**