



Project Submission/Approval for College of Veterinary Medicine & Biomedical Sciences

Return to: Project Records; AgriLife Research; College Station, TX 77843, MS 2147

Physical Location(not for Mail): AgriLife Services(AGSV) Bldg, 578 John Kimbrough Blvd, College Station, TX 77843

Project Title: _____

This project is: a new project; a revision of project; a replacement of project

PI Name: _____ Dept./Center: _____

Personnel & Coworkers involved in this project: _____

Project Reviewers:

Name:	Address:
Phone:	Email:
Name:	Address:
Phone:	Email:
Name:	Address:
Phone:	Email:

Note: submit copies of reviews with final proposal.

This research involves: *Human Subjects (Yes; No), *Biotech – DNA (Yes; No), *Animal Welfare (Yes; No).

***Approved protocols will need to be obtained. Please complete necessary forms and submit to Project Records for submission to appropriate risk section.**

In this research, will you have integrated activity with AgriLife Extension? Yes No

If yes, estimated percent effort _____%

Signatures/Administrative Concurrence:

 Project Leader

 Date

 Department Head

 Date

 Dean, College of Veterinary Medicine & Biomedical Sciences

 Date

 Executive Associate Director, Bill McCutchen

 Date

For questions concerning this form, please contact Project Records at 979-845-7987.