



CSB Necropsy Room Access Request Form

Date of request:

Principal investigator(s):

Start and end date of project:

Name of project:

Description of proposed work / research:

When is access to necropsy room needed? Please provide date(s) and approximate times (or hours needed per day):

Who will need access to the necropsy room? Please provide names, titles and indicate if they are not University of Calgary employees:

Do you require the services of a pathologist? If yes, please provide details:

Do you require the technical assistance of the necropsy staff? If yes, please provide details:

Do you have any other special requirements, for example equipment, training, supplies, or services?

Animal care protocol number:

Biosafety permit: Please attach copy of current permit. Note - use of the necropsy room may require that the room be added to your biosafety permit.