**The Flinders University Animal Welfare Committee**

**Animal Owner Informed Consent – Use of Animals for Research or Teaching**

**INFORMATION SHEET**

As the owner, or duly authorised agent for the owner, you have been asked to have your animal participate in a research study. Your informed consent is required prior to this use.

Please read this document and accompanying Consent Form carefully, and feel free to ask any questions you might have.

|  |  |
| --- | --- |
| **AWC Approval Number:** |  |
| **Animal Project Title:** |  |
| **Chief Investigator:** |  |
| **Chief Investigator Email:** |  |
| **Person Responsible for the animal(s) during the Research Study:** |  |
| **Contact Details of Responsible Person:** |  |
| **Location where animal(s) participation/research study occurs:** |  |
| **Aims and benefits of the Research Study:** |  |
| **Duration of animal(s) participation:** |  |
| **Description of animal(s) procedures to be carried out:** |  |
| **Possible discomfort, risks and complications and steps taken to minimise risks:** |  |
| **Animal(s) to be returned:** | **Yes** [ ] **No** [ ]  | **Details:** |

**Voluntary Participation:**

The participation of your animal is voluntary, and you may withdraw your animal(s) for any reason, at any time. If you do not wish to participate, you do not have to provide any reason for your decision. Refusal to participate, or withdrawal, will in no way affect the care to which animal participants are otherwise entitled. If you withdraw, any data collected about your animal will be retained for analysis.

**Unforeseen Risks:**

Unforeseen risks might arise at any time during the research study. The research investigators will promptly inform owners of all animals participating in the study of any new information that may affect their willingness to participate. **There is a risk your animal may behave in an unexpected manner, and consequently, cause damage to yourself, your property, others, or their property. You confirm, as part of this agreement, that you indemnify Flinders University and its staff of any liability for damages caused by your animal to yourself or property**.

**Termination of Participation by Chief Investigator:**

The research investigators have the right to terminate the research study for any, and all, participants at any time, and for any reason.

**Financial Implications:**

There will be no cost to you for the participation of your animal in the research study. You will not be charged for any of the procedures performed solely for the study’s purposes. You will receive no reimbursement for the participation of your animal in the research study. All unrelated costs for diagnosis, management, and treatment of your animal are your responsibility (relates to veterinary studies). Flinders University does not provide compensation or therapy for any injuries or losses that may occur as a result of participation. If the animal is insured, you are advised to notify the insurer of involvement in a research project.

**Knowledge Transfer/Publication of Research Findings:**

*(Indicate how and to whom the research findings will be reported. Indicate how consenting owners may find out about the results of the research study. May not apply to all research, such as commercial-in-confidence research)*

**Privacy:**

Personal information collected by the research investigators will be used in accordance with the South Australian Information Privacy Principles and Flinders University’s Privacy Policy. If you wish to enquire about the handling of your personal information, please contact the Flinders University Privacy Officer via privacy@flinders.edu.au or (08) 8201 5172.

**Confidentiality:**

Owner and animal confidentiality will be maintained. No identification of individuals will be made when reporting or publishing the data arising from this study.

*(Additional Clauses Tailored to the details of the Research Study as required)*

**Further Information:**

If you have any questions or concerns relating to the practical aspects of the research study, please feel free to ask at any point. You are free to contact the Chief Investigator using the contact details provided above.

This research study has been approved by the Flinders University Animal Welfare Committee. If you wish to discuss other matters or concerns relating to this project with the Animal Welfare Committee, or if you have any questions/comments/concerns during the project, please contact:

|  |  |
| --- | --- |
| **Animal Ethics Officer:** | **Animal Welfare Officer:**  |
| **Dr Alison Elder**Phone: (08) 8201 5962M: 0433 122 700Email: animal.welfare@flinders.edu.au | **Dr Lewis Vaughan**M: 0450 424 143Email: awo@flinders.edu.au |

**The Flinders University Animal Welfare Committee**

**Consent Form - For Animal Participation in Research or Teaching**

**NAME & IDENTIFICATION OF ANIMAL(S)**

|  |  |
| --- | --- |
| **Name:**  |  |
| **Species:** |  |
| **Breed:** |  |
| **Sex:** |  |
| **Age:** |  |
| **Other identifying features (e.g. coat colour, tag number):** |  |

**DECLARATION BY THE CONSENTING OWNER/AUTHORISED AGENT**

1. I, ................................................................................................................. *(please print name)* certify that I am at least 18 years of age, I am the owner (or duly authorised representative of the owner) of the above animal(s), and that the animal(s) are free of any lien or claim by any other person or persons.
2. I acknowledge that I have read the attached Information sheet for the research project entitled: ……………………………………………………………………………………………………………….. and have had the participation of my animal(s) in the research study fully explained to me by the research investigator: ………………………………………………………………………………………… *(please print name)*
3. I understand that this research participation may involve leaving my animal(s) in the care of suitably trained and authorised staff of Flinders University. Where this situation applies, I have had the opportunity to ask questions and discuss any aspects of the participation with the research investigator.
4. I understand that the participation of my animal(s) is voluntary, and I may withdraw my animal(s) for any reason, at any time. My consent is freely given.
5. I understand that some risk always exists when animal handling and animal procedures are performed. I understand that the research investigator(s) will inform me of any new risks that may be identified, or any material changes in the way the study will be conducted.
6. I am aware that this project has current approval by the Flinders University Animal Welfare Committee.
7. I understand that all private data pertaining to me and my animal(s) will be treated in strict confidence.
8. I am aware that I should retain a copy of this Consent Form and attached Information Sheet.
9. I understand that I am obliged to follow any safety, instructional, and WH&S instructions given to me by the researchers or any other authorised staff of Flinders University.
10. I understand that I am obliged to inform the researchers of any risks (i.e. behavioural, medical, etc) that my animal may present.
11. *(Additional Clauses Tailored to the details of the Research Study as required)*

PRINT NAME…………………………………………………………………………………...

Signature………………………………………… Date…………………….

Contact Phone……………………… Contact Address…………………………………………………..

Contact Email.………………………………………

Emergency Contact Name………………………… Emergency Contact Phone………………………

**CHIEF INVESTIGATOR DECLARATION**

1. I have described to the animal owner/authorised agent the nature of the animal(s) participation in the research study. In my opinion he/she understood the explanation.

PRINT NAME…………………………………………………………………………………...

Signature………………………………………… Date…………………….

*NOTE*Original of consent form to be retained by the Chief Investigator

Copy to be given to the consenting owner/agent

Copy to be given to the Animal Ethics Officer