**University of Montana**

**Institutional Animal Care and Use Committee (IACUC)**

**Documentation of Reading the Specified AUP**

**PI:**

**AUP #:**

**The undersigned certify they have read, understand and agree to follow the procedures outlined in the above animal use protocol (AUP).**

***PIs please fill out this form for all students/staff/other listed as a participant on the AUP. Keep these forms with your other AUP-related documents. We will ask to see these forms annually.***

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| **Date** | **Printed Name** | **Signature** |
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