**Application for Registration as Animal Experiment Researcher and Letter of Declaration**

Date: (mm/dd/yyyy)

To: Director of Safety Office

Japan Synchrotron Radiation Research Institute

For the management of animal experiment researchers, I hereby request registration of the person named below as an animal experiment researcher.

|  |  |  |  |
| --- | --- | --- | --- |
| Person to be registered | Name | |  |
| Affiliation | |  |
| Division, Position | | （grade if student; ） |
| User ID number | |  |
| Contact information of the person to be registered | Address | | (ZIP code ) |
| Telephone (extension) | |  |
| E-mail | |  |
| Experience in experiments on animals | ( )Yes ( )No（if yes, specify the species and the period: ） | | |
| **Period (till the end of an Japanese fiscal year)** | | **until 31 / March / 20\_ \_** | |
| Place of the experiment | |  | |

Declaration

1. The person above has received education and medical checks as required in his/her own country to conduct an experiment on animals. The records of the education and checks are kept in our institute and can be provided to the Japan Synchrotron Radiation Research Institute when requested.

2. I permit the person to engage in animal experiments at the Japan Synchrotron Radiation Research Institute.

3. I will report to the Japan Synchrotron Radiation Research Institute if the person is found unfit for animal experiments in medical checks.

Name of Representative1)

1)Provide the name of the person responsible for the implementation of animal experiments.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ( )First time ( )Re-registration(if so, the date of previous registration ) | | | | | | | |
| Registered on |  | Safety Office |  | General Administration Div. |  | Received on |  |

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