

CLAF Animal Order Form

1. Animal Order

a. Order Details:

- Animal Use Protocol (AUP) Number:
- Funding Source/Cost Center Number:
- Workday Driving Tags:
- Fiscal Staff Contact Information:
- Date animals are needed:
- Species:
- Strain:
- Number of animals:
- Sex:
- Age:
- Weight:
- Source (List a preferred vendor if applicable):
- Request housing location (CLAF, ENRC, Specific Room)
- Number of animals per cage:
- Projected experiment end date:

b. To be completed by CLAF representative:

- Date order was placed:
- Expected delivery date:
- Vendor:
- Order confirmation number:
- Total order cost:
- Date received:

