

**Biodata and consent format for  
Members of the Institutional Animal Ethics Committee**

<b>Name:</b>		<b>Sex:</b>	
<b>Date of Birth (dd/mm/yy):</b>			
<b>Professional Mailing Address (Include institutional name)</b>			
<b>Telephone (Office) :</b>		<b>Mobile Number :</b>	
<b>Telephone (Residence):</b>		<b>E-Mail:</b>	
<b>Academic Qualifications (Most current qualification first):</b>			
<b>Degree / Certificate</b>	<b>Subject</b>	<b>Year</b>	<b>Institution, Country</b>
<b>Professional Experience:</b>			
<b>Month and Year</b>	<b>Title</b>	<b>Institution / Company, Country</b>	
<b>Experience in animal handling/ research:</b>			
<b>Month and Year</b>	<b>Area of Specialization</b>	<b>Institution / Company, Country</b>	
<b>Consent:</b>			
<p>I hereby give my consent to be the member of the IAEC of  (Name of the establishment)  .....</p> <p>I undertake to follow all the rules and guidelines of the CPCSEA.</p>			
<b>Signature:</b>			
<b>Date:</b>			