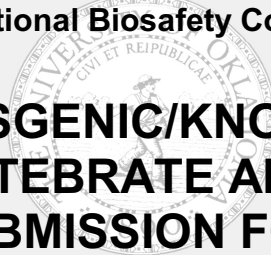


**TRANSGENIC/KNOCKOUT  
VERTEBRATE ANIMAL  
SUBMISSION FORM**



FOR IBC USE ONLY

Date received: \_\_\_\_\_  
Experiment class determination:  
 III-D Requires IBC approval before initiation  
 III-E Requires IBC notice simultaneous with initiation  
Biosafety level (BSL) required:  BSL1  BSL2  BSL3  BSL4  N/A  
Approved/Disapproved IBC #: \_\_\_\_\_  
Date approved: \_\_\_\_\_  
IBC signature: \_\_\_\_\_

**INSTRUCTIONS: ALL PAGES OF THIS FORM MUST BE SUBMITTED. This form must be completed, submitted and approved for the generation of animals in which the animal's genome will be altered by stable introduction of recombinant DNA, or DNA derived therefrom, into the germ-line or modified to eliminate specific gene(s) (transgenic/knockout animals) where such animals are created in an OUHSC facility. This form must be signed by both the PI requesting the creation of the transgenic animal and a responsible representative from the facility creating the transgenic animal, if applicable. This form is also required for the mating of two transgenic lines to create a double transgenic. This form is not required for the purchase and/or use of transgenic vertebrate animals when these animals are obtained from a source outside the OUHSC.**

**SECTION I - Complete this section for all transgenic/knockout protocol submissions.**

- Principal Investigator (PI) name and degree\*: \_\_\_\_\_  
**\*If not faculty, identify faculty mentor in item 2. below and have faculty mentor also sign this form on page 2.**  
Title: \_\_\_\_\_  
College/department: \_\_\_\_\_  
Campus address: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_
- Co-Investigator name and degree (if applicable): \_\_\_\_\_  
Title: \_\_\_\_\_  
College/department: \_\_\_\_\_  
Campus address: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_
- Project title: \_\_\_\_\_
- Project location where animals will be genetically modified (building and room #): \_\_\_\_\_
- Project location where animals will be used (building and room #): \_\_\_\_\_
- Funding agency: \_\_\_\_\_
- Grant start date: \_\_\_\_\_ Grant end date: \_\_\_\_\_
- Proposed project initiation date: \_\_\_\_\_  
**NOTE: Projects level III-D and above may not begin until IBC approval has been received (see item 17).**
- Species and strain(s) of animal(s) to be used (e.g., BALBc mouse): \_\_\_\_\_
- Name the commercial source/individual/institution supplying the animals to be modified: \_\_\_\_\_

**SECTION II - Complete this section for mating of two existing transgenic/knockout lines only. For creation of a new transgenic/knockout line, skip to Section III.**

- Describe each source animal line's existing genetic modification:  
**Source 1:**  
If knockout, specify gene sequence deleted, and its function, and the result of the deletion: \_\_\_\_\_  
\_\_\_\_\_  
If a gene has been inserted into the animal's genome, indicate the gene that has been inserted and its function: \_\_\_\_\_  
\_\_\_\_\_  
**Source 2:**  
If knockout, specify gene sequence deleted, and its function, and the result of the deletion: \_\_\_\_\_  
\_\_\_\_\_  
If a gene has been inserted into the animal's genome, indicate the gene that has been inserted and its function: \_\_\_\_\_  
\_\_\_\_\_

12. Describe the resulting double transgenic line and the anticipated result of the mating: \_\_\_\_\_

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### SECTION III - Complete this section for creation of a new transgenic/knockout lines.

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13. Transgenic Facility representative name and degree: \_\_\_\_\_

Title: \_\_\_\_\_

Facility Name: \_\_\_\_\_

Campus address: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

14. Has the source animal already been genetically modified?      Yes      No  
If yes, describe the genetic modification(s): \_\_\_\_\_

15. If knockout to be created, specify gene sequence to be deleted and its function:  
\_\_\_\_\_  
\_\_\_\_\_

16. If a gene will be inserted into an animal's genome:  
Describe the gene that will be used and its function: \_\_\_\_\_

Describe the vector: \_\_\_\_\_

Describe any promoter, enhancer, or regulatory elements to be used: \_\_\_\_\_

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### SECTION IV - Complete this section for all transgenic/knockout protocol submissions.

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17. NIH experiment class determination (check one):

III-D      Requires IBC approval before initiation (vertebrates other than rodents, and rodents under BSL-2 and above)

III-E      Requires IBC notice simultaneous with initiation (rodents under BSL-1 conditions)

18. Do experiments involve the release into the environment (outside the facility) of an animal containing recombinant DNA?      Yes      No  
**If yes, has approval for this release been filed with state or federal regulation agency?**      Yes      No

**If yes, identify the regulatory agency and date filed, and send copy of approval to the OUHSC EHSO, ROB-301:**

\_\_\_\_\_ (agency) \_\_\_\_\_ (date filed)

19. In the following space, please provide a summary statement of the intent of the proposal and describe your project with respect to the creation of transgenic animals.

#### CERTIFICATION AND SIGNATURE

The above information is accurate and complete. As Principal Investigator, I agree to comply with federal, state and university requirements pertaining to handling, shipment and transfer of biological materials. I agree to accept responsibility for the training of all workers involved in this project.

Principal Investigator signature: \_\_\_\_\_

Date: \_\_\_\_\_

Co-Investigator/Faculty Mentor signature (if applicable): \_\_\_\_\_

Date: \_\_\_\_\_

Transgenic Facility Representative signature (if applicable): \_\_\_\_\_

Date: \_\_\_\_\_

**Please send this form to the IBC Office, BMSB 207.**

NOTE: Any other use of recombinant DNA, microorganisms, or biological toxins associated with this project must also be submitted to the IBC for approval using the appropriate form. This form is only for approval of the creation/distribution of transgenic mice or frogs generated at the OUHSC.