

**KNOXVILLE ZOOLOGICAL GARDENS
RESEARCH PROPOSAL APPLICATION**

SEND COMPLETED APPLICATION TO:

Jennifer Manrod
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Knoxville Zoological Gardens
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**INSTRUCTIONS: PLEASE TYPE OR PRINT LEGIBLY.
COMPLETE ENTIRE APPLICATION.**

1. _____
Principal Investigator Position Office Phone/Ext. Home Phone

2. _____
Institution Department Affiliation Email

3. Check those that apply: ___ Staff ___ Student (___ grad. ___ undergrad ___ other)

4. If the principal investigator is a student, list the immediate supervisor/departamental contact:

Supervisor Position Phone/Extension

5. _____
Investigator Office Address City State Zip Code

6. _____
Investigator Home Address City State Zip Code

7. _____
Title of Project

8. _____
Coinvestigator Position Phone Number

Coinvestigator Position Phone Number

9. Expected Start Date of the Project: _____ (dd/mm/yyyy)
Expected End Date of the Project: _____ (dd/mm/yyyy)

10. _____
Funding Source Name (if applicable) Address

11. Check all that apply to the project methodology:

- | | |
|---|---|
| <input type="checkbox"/> behavior observation | <input type="checkbox"/> medical procedures required |
| <input type="checkbox"/> animal contact required | <input type="checkbox"/> visitor survey/observation |
| <input type="checkbox"/> utilizes exhibit animals | <input type="checkbox"/> utilizes free-ranging animals. |
| <input type="checkbox"/> utilizes off exhibit animals | <input type="checkbox"/> botanical project |
| <input type="checkbox"/> requires significant keeper time
(greater than 1 hour per week) | <input type="checkbox"/> other (please specify other important
requirements of the methodology below).

_____ |

12. Identify the species name(s) and number of individuals to be utilized in the project:

Genus	Species	Common Name	Number of Individuals

13. Is this species managed under an SSP or TAG? _____ **IF SO, ENCLOSE MATERIALS INDICATING ENDORSEMENT OR NEED FOR THIS RESEARCH.**

14. Has this project been reviewed by another institution's animal care and use committee? _____ **IF SO, ENCLOSE YOUR SUBMISSION FORM AND THEIR REVIEW.**

Please attach pages that fulfill the following requests.

15. Research Summary:

- A. Provide a scientific summary of the aims and objectives of this project and the significance of this project. Provide sufficient detail so that a careful evaluation of the project and its associated protocols can be made. (Use additional paper if necessary. A copy of the abstract or summary submitted with the funding application may be used).
- B. Describe the characteristics of the animal that justify its use in the proposed study. (Why is this animal the most appropriate for the study?)

16. List reference sources which have been consulted in association with the development of this project that support the soundness of the proposed methods.

17. Describe how the zoo will benefit from this research.

18. Animal Husbandry:

- A. Please specify any deviation from standard husbandry which your protocol may require, e.g., diet change, housing change, use of keeper time, change in animal group composition, enclosure access, etc.
- B. Does an SSP protocol which encompasses this project exist? (e.g., diet or husbandry recommendations, necropsy protocol, etc.) _____ IF SO, PLEASE ENCLOSE A COPY.

19. Medical Procedures:

- A. Describe all medical procedure involving the animal(s) in the study.
- B. Include names and titles of individual performing the procedures and their relevant qualifications - append curriculum vitae as appropriate.

20. List any tissue or body fluids to be collected during the project. How will these be obtained/collected? How will they be stored or disposed of after project completion?