



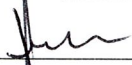
Animal Care Facility Form

TITLE: Animal Care Facility Access

Document No.: 928.01.frm

Effective Date: 6/16/2014

ORIGINATOR: Amable Tellez

APPROVED:  6/16/14 (Attending Veterinarian)

Summary of Changes to this Document:

Distribution:
(1) Animal Facility



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I have read the SOP 206.01- Animal Care Facility Access and I agree to follow the rules. I acknowledge that these rules are necessary to prevent accidents and to ensure my own safety, the safety of the animals and the safety of others around me. Failure to follow these access rules may result in losing animal facility access, as well as other disciplinary actions.

Signature

Print Name

Date

Contact Number

Reviewed By: _____ Date: _____