

Protocol No.  
(assigned by CRI IACUC)



**Documentary Proof of Ethical Clearance**  
**Chulabhorn Research Institute Animal Care and Use Committee**  
**(CRI IACUC)**

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**Protocol Title:**

**Principal Investigator:**

**Address:**

**E-mail:**

**CRI IACUC Review:**

The CRI IACUC has reviewed the aforementioned protocol and

- ☐ Recommends it for approval by the Institutional Official (IO)  
☐ Does not recommend it for approval by the Institutional Official (IO)

\_\_\_\_\_  
Chair, CRI IACUC

\_\_\_\_\_  
Date

**CRI IO:**

I hereby ☐ approve the aforementioned protocol.  
☐ do not approve

\_\_\_\_\_  
CRI Institutional Official (IO)

\_\_\_\_\_  
Date

(Note: In cases of where the Institutional Official is the Principle Investigator, the proof of Ethical Clearance form is signed by the Vice-president for Research)