

Peter Williamson Associate Professor of Genomics Associate Dean for Research

CONSENT FORM FOR ANIMAL RESEARCH PROPOSALS Research Project

TITLE: Investigation of an inherited neurodegenerative disorder in Australian Kelpie dogs

"I, Mr/Mrs/Ms	[NAME OF OWNER]
agree to permit	[DOG'S CALL NAME]
of	[ADDRESS]
who is aged	[DATE OF BIRTH], [GENDER], and is

entire/de-sexed (circle one) to participate in the above named research study."

I have read and understood the information statement on the above named research study and I have discussed it with the researcher/s.

In giving my consent I acknowledge that:

- 1. The procedures required for the project and the time involved have been explained to me, and any questions I have about the project have been answered to my satisfaction.
- 2. I have read the Information Statement and have been given the opportunity to discuss the information and my involvement in the project with the researcher/s.
- 3. I am aware of the diagnostic and research procedures involved in the study, which may include restraint, examination and blood sample collection and understand these may involve temporary discomfort for my dog(s).
- 4. (If applicable) In addition to the above, I also agree to give my permission for the following activities to be undertaken (please tick the box and signed where applicable):

Permission to undertake clinical assessment, neurological examination.

Signature: _____

Permission to undertake diagnostic imaging under anaesthesia.

Signature: _____

Permission to donate the dog for euthanasia and necropsy.

Signature: _____

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Permission to collect, store and use a range of tissue samples from necropsy for research.

Signature: _____

- 5. I understand that I can withdraw my dog(s) from the study at any time, without affecting my relationship with the researcher(s) or the University of Sydney now or in the future.
- 6. I understand that my involvement is strictly confidential and no information about me or my pet will be used in any way that reveals my identity.
- 7. I understand that being in this study is completely voluntary I am not under any obligation to consent.
- 8. Any costs associated with my participation have been explained to me.

I consent to any remaining sample to be retained for future research projects.

□ I *do not* consent to collected samples to be retained for future research projects.

Signed:	
Name:	
Email:	
Date:	

The more information that you can provide, the more useful the sample will be to us. However, anonymous samples are still usable if you would prefer not to uniquely identify your animal to us. **All details about the animals and owners will be kept confidential.**

PEDIGREE DETAILS (Fill in or attach printed pedigree)

Registered Name:	Date of Birth:
Sample label (if different from above) or Call Nam	e
Registration No.:	Microchip No.:
Paternal Grandsire:	
Sire:	Reg No:
Maternal Grandsire:	
Dam:	Reg No: