

Review for Scientific Merit

Completed forms are to be submitted electronically

AUP Number: _____ **Principal Investigator:** _____

Project Title: _____

Please select one of the two following options:

1. **Independent Reviewer:** As an independent reviewer of this project I, _____ confirm that I, nor any graduate students whom I currently supervise are involved in the project indicated below.

OR

2. **Graduate Student Advisory Committee (for graduate student thesis projects)*:**
We, _____ confirm that we are members of the graduate student advisory committee for the student leading this project.

Please evaluate the following (with sufficient detail to justify your conclusion):

Significance: _____

Justification for Animal Use: _____

Experimental Design, including proposed statistical analysis **and animal numbers:** _____

Additional Comments: _____

Conclusion: Research Proposal has Scientific Merit.
Research Proposal does not have Scientific Merit.
More information is required to evaluate this Proposal.

Reviewed by:

Name	Signature	Date

*If less than 2 members outside of the Principal Investigator, further internal scientific merit review may be required.
Graduate student advisory committee reviews are to be submitted to acc@uoguelph.ca
Independent reviews are to be submitted to jwesley@uoguelph.ca