BIOTERIO UNAM - IBT

SOLICITUD DE ANIMALES

2023

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NOMBRE, CORREO y TELEFONO DEL USUARIO SOLICITANTE Nombre y número de aprobación del Comité Bioética\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Indique con una **X** el “Grado de severidad” que fue aprobado por el Comité de bioética: B C D E  Obs\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Nombre y firma del jefe de grupo\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No de laboratorio \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Especie\_\_\_\_\_\_\_\_\_\_\_\_\_ Cepa\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sexo\_\_\_\_\_\_\_\_\_\_\_ Edad o peso \_\_\_\_\_\_\_\_\_\_DISTRIBUCION DE LOS PEDIDOS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Fecha | Cantidad Solicitada | Observaciones | CantidadEntregada | Observaciones |
| ENE - 23 |  |  |  |  |
| FEB |  |  |  |  |
| MAR |  |  |  |  |
| ABR |  |  |  |  |
| MAY |  |  |  |  |
| JUN |  |  |  |  |
| JUL |  |  |  |  |
| AGO |  |  |  |  |
| SEP |  |  |  |  |
| OCT |  |  |  |  |
| NOV |  |  |  |  |
| DIC |  |  |  |  |
| ENE - 24 |  |  |  |  |
| Totales |  |  |  |  |
|  |  |  |  |  |

 |

Fecha y firma de aceptación Bioterio IBT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No, de registro\_\_\_\_\_\_\_\_\_\_\_\_

NOTA : Todo ajuste a las cantidades del programa, deberá ser autorizado y notificado por el usuario vía correo a los responsables de la producción o atención de la colonia\* , enviando correo a su Jefe de grupo y al personal académico del bioterio:

graciela.cabeza@ibt.unam.mx  / sergio.gonzalez@ibt.unam.mx / oswaldo@ibt.unam.mx /

elizabeth.mata@ibt.unam.mx