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Every research facility, exhibitor, carrier, and intermediate handler not required to be licensed under Section 3 of the Animal Welfare Act, shall register with the USDA (7 U.S.C. 2136). This application provides information for such registration.

OMB Approved
0578-0036
Exp. XX/XXX

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
APPLICATION FOR REGISTRATION
(TYPE OR PRINT)

REGISTRATION UPDATE

USDA USE ONLY

Applicant should send completed form to this address

USDA/APHIS/AC
2150 Centre Ave.
Building B, Mailstop 3W11
Fort Collins, CO 80526-8117
(970) 494-7478

CERTIFICATE NO./CUSTOMER NO:

65-R-0001

839

RENEWAL DATE

1-June-2020

1. REGISTRANT (Name and permanent mailing address, including ZIP Code)

University of Mississippi
Vice Chancellor for Research and Sponsored Programs
100 Barn Hall
University, MS 38677

COUNTY : LAFAYETTE

TELEPHONE : 662-915-7428

2. LOCATION(s) OF BUSINESS, EXHIBITION SITE(s), OR RESEARCH FACILITIES
(Use additional sheets if necessary)

Business:
100 Barn Hall
University, MS 38677
County: Lafayette

Research Facility:

(b) (7)(F)

3. PREVIOUS USDA REGISTRATION NUMBER (if any)

4. ACTIVE USDA CERTIFICATE NUMBER(S) IN WHICH YOU HAVE AN INTEREST:

5. ARE YOU USING FEDERAL FUNDS TO CARRYOUT
RESEARCH, TESTS, OR EXPERIMENTS?

☒ Yes ☐ No

6. TYPE OF REGISTRATION:

☐ Class E - Exhibitor ☐ Class H - Intermediate Handler
☒ Class R - Research Facility ☐ Class T - Carrier

7. FEDERAL FUND TYPES:

☒ Award ☒ Contract ☒ Grant ☐ Loan

8. TYPE OF ORGANIZATION:

☐ Individual ☐ Corporation ☐ Partnership
☒ Other (University, State, Municipality, LLC, Trust) University

9. IF INDIVIDUAL IDENTIFY EACH OWNER, IF PARTNERSHIP IDENTIFY EACH PARTNER OR OFFICER, IF CORPORATION, IDENTIFY PRINCIPAL OFFICERS FOR RESEARCH FACILITIES
INCLUDE THE INSTITUTIONAL OFFICIAL (Use separate sheet if needed)

A.	NAME	B.	TITLE	C.	ADDRESS (full address, including ZIP Code)
	(b) (6), (b) (7)(C)				(b) (7)(F)

CERTIFICATION

I hereby register as a Research Facility, Exhibitor, Carrier, or Intermediate Handler under the Animal Welfare Act, 7 U.S.C. 2131 et seq. and I certify that the information provided herein is true and correct to the best of my knowledge. I hereby acknowledge receipt of and agree to comply with all the regulations and standards contained in 9 CFR, Subpart A, parts 1, 2 and 3. I certify that all listed persons are 18 years of age or older.

10. SIGNATURE

(b) (6), (b) (7)(C)

13. DATE SIGNED

5/14/2020

ACKNOWLEDGMENT OF RECEIPT OF REGULATIONS AND STANDARDS