Name: SUNY College at Cortland [A019]

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NEW YORK STATE DEPARTMENT OF HEALTH WADSWORTH CENTER LABORATORY ANIMAL WELFARE PROGRAM EMPIRE STATE PLAZA, P.O. BOX 509 ALBANY, NEW YORK 12201-0509

2019 RENEWAL APPLICATION FOR APPROVAL FOR USE OF LIVING ANIMALS

SECTION I - GENERAL LABORATORY/INSTITUTION INFORMATION

CURRENT DATA	INDICATE CHANGES HERE
Laboratory/Institution Name: SUNY College at Cortland	
Address 1: P.O. Box 2000	
Address 2:	
Clty, State, Zipcode: Cortland, NY 13045	
County: Cortland	
Telephone Number: 607-753-4312	
Fax Number: 607-753-5979	
E-mail Address: bruce.mattingly@cortland.edu	

AW-APP01(10/2007)

Uploaded to Animal Research Laboratory Overv 06/29/2021

SECTION I - GENERAL LABORATORY/INSTITUTION INFORMATION

Ownership:					
□ Corporation □ Other:	Government	□ Individual	Not F	or Profit	□ Partnership
Facility Type:					
□ 2 Year College □ Hospital □ Public Health La □ Other:		4 Year College Medical School Research & Develoj	C	Direct Product	or Environmental Lab Testing Lab ry School

_NYS-Dept-of-Health_lab-renewal_2019

SECTION II - PROGRAM INFORMATION

Animais (Check all that	apply):		
X Mice (genus mus) ☐ Mice (wild or other) Ø Rats (genus rattus) ☐ Rats (wild or other) Ø Other:V_0\eS	 Hamsters Guinea Pigs Rabbits Small Birds 	⊠ Fish □ Cats □ Dogs □ Non-Human Pr	□ Sheep/Goats □ Cattle □ Swine imates □ Poultry
Are you currently housin	g live animals at you	r institution?	□ No
If you are not curren having live animals i	tly housing live anim n your facility during	als, do you anticipate the next 12 months?*	□ Yes □ No
*LAWP permits are issued animals for teaching and/ and facilities to properly a	or research and have the	appropriate programs	
Does your laboratory/ins (If Yes, attach a copy of the Comm	stitution have an Anir		ØYes □No
Since your last applicati animal care and use pro control, environmental r (If Yes, please explain)	ocedures (i.e. feeding	g programs, disease	□Yes XNo
conditions should	hat require the withho the animals to adve be documented in y proved by your IACU	erse or unusual /our animal use	
Living animals are us	ed for (Check all the	at apply):	
 □ Diagnostic Procedure ☑ Experimentation □ Public Display □ Other: 	9 8	Farm Producti	aching Demonstrations on Disease Survellience
Are animals used in stu (If Yes, attach a copy of your proc	udies with human info redures for processing medica	ectious agents? □ Y I waste generated by the animals)	es 🛱 No
Registration/Accredit	ation Type:		
AAALAC Accredited Other:		Registered	
AW-APP01(10/2007)			

	(URRENT DATA			NDICATE CHANGE	S HERE
Laboratory/Ins	stitution F	erson In Charge (N	ame):			
Mattingly, Bruc	8				·	·
Title:						
Dean						
Telephone Nu						
607-753-4312	1997 - 1997 -		<u>.</u>	an a	a na sa ang sa	and a second with the second of the second
					- Springer (, and , references and an analysis and a structure and	alah dise ana kakamana ang seri kang kakaman na seri kang kang seri kang seri kang seri kang seri kang seri kan Kang seri kang seri k
Work Hours:				Work Hours:		
MON: 8:00	am to	4:30 pm		Mon:	to	
TUE: 8:00	2019년 2019년 1월 1999년 1월 1999년 1월 1999년 1월 1999년 1월 1월 1999년 1월 1	4:30 pm		Tue:	to	
WED: 8:00	24월23일 (Shine) (Shine) (Shine)	4:30 pm		Wed:	to	
THU: 8:00		4:30 pm		Thu:	to	
FRI: 8:00		4:30 pm		Frl:	to	
	to		양 관계 등 일 수 있는 것	Sat:	to	
	to			<u> Sun:</u>	to	and a second

CURRENT DATA	INDICATE CHANGES HERE
Veterinarian in Charge (Name): Alaimo, Rose	Wagner, Rebecca
Title: DVM	DVM
Telephone Number: 570-829-4030	607 844 9188
Work Name/Address (If different from laboratory/institution): Crossroads Veterinary Clinic 242 S. River St. Wilkes Barre, PA 18705	Countryside Veterinary Hosp 136 North ct Dryden NY 13053
Work Hours:	Work Hours:
MON: 8:00 am to 5:00 am TUE: 8:00 am to 5:30 pm WED: 8:00 am to 5:00 pm THU: 8:00 am to 5:30 pm FRI: 8:00 am to 5:00 pm SAT: 8:00 am to 12:30 pm	Mon: Tue: Wed: Thu: Fri: Sat: 9 am to Sun: closed to to to to to to to to to to

CURRENT DATA		IND	CATE CHANG	ES HERE
Contact Person (Name):				
Funk, Andrew		unarramine de la serie de la companya de la company	ay darawan kanang sang sang sang sang sang sang sang	n Marine - Milleracha (S. 1966). Marine Marine - Gautari anno 1991 - Secolar
Title:				•
Bio. Instruct, Tech.				
Telephone Number:				
607-753-2722				
				•
			and a second	Anter - americanetter - conspirate a constant and a substantia and a substantia
Work Hours:		Work Hours:		
MON: 7:00 am to 3:30 pm		Mon:	to	
TUE: 7:00 am to 3:30 pm		Tue:	to	
WED: 7:00 am to 3:30 pm		Wed:	to	
THU: 7:00 am to 3:30 pm		Thu:	to	
FRI: 7:00 am to 3:30 pm		Fri:	to	
to		Sat:	to	
to	문동원 중에 해외했다.	Sun:	to	an an ann an

Attach a list of all full-time and part-time animal care staff which includes the following information: Name, Full-Time or Part-Time, Title and Education Level (Highest).

No additional staff.

SECTION IV - ATTESTATION

I have read the Administrative Rules and Regulations concerning the use of living animals and understand that I am fully responsible for all work involving the use of living animals. I understand that the Certificate of Approval is not transferable and the New York State Department of Health (the Department) shall be advised promptly if the individual, in whose name approval has been granted, ceases to be in charge. The facility(ies) will be operated according to all applicable laws, rules and regulations.

I understand that by signing this application form I agree to cooperate with any investigations conducted by the Department to verify or confirm information given or any other investigation conducted in connection with animal welfare in any facility identified in this application. If additional information is requested, I will provide it.

In signing this application, I hereby certify that the information I have given the Department as a basis for obtaining or retaining a certificate of approval is true and correct. As information changes, I will promptly notify the Department. Further, I understand that filing a false instrument constitutes a crime under the Penal Law of the State of New York.

Dean, OrtstSciences) Title Signature, Laboratory/Institutional Officer

SECTION V - ADDITIONAL SITES WHERE LIVING ANIMALS ARE LOCATED

CURRENT DATA	INDICATE CHANGES HERE
Site [004] Name:	
SUNY at Cortland - Psychology Department	
Address 1:	
Moffett Hall, 1st Fl., Rm. 8	
Address 2:	
City, State, Zipcode:	
Cortland, NY 13045	
Site Telephone Number: 607-753-2770	
Site Fax Number:	
Site E-mail Address:	
Contact Person (Name):	
Peck, Joshua	

SUNY Cortland Animal Care Staff 2018-2019

Name	Full/Part-time	Title	Education Level
Deborah Slater	Part-time	Laboratory Helper	High School
Scott Suhr	Part-time	Laboratory Helper	B.A.
Mary Beth Voltura	Part-time	Associate Professor	Ph.D.
Joshua Peck	Part-time	Assistant Professor	Ph.D.
Andrew Funk	Full-time	Support Technician	B.S. in Biology

Name: SUNY College at Cortland [A019]

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Code	A019	
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County: Cortland	
Telephone Number: 607-753-4312	
Fax Number: 607-753-5979	
E-mail Address: bruce.mattingly@cortland.edu	

SECTION I - GENERAL LABORATORY/INSTITUTION INFORMATION

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□ Corporation □ Other:	Government	⊡ Individual	Not For Profit	□ Partnership
Facility Type:				
 □ 2 Year College □ Hospital □ Public Health La □ Other: 	ΞN	Year College Aedical School Research & Develop	☐ Clinical o ☐ Product oment Lab □ Veterina	

SECTION II - PROGRAM INFORMATION

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Animals (Check all that apply):				
Image: Mice (genus mus)Image: HamsterImage: Mice (wild or other)Image: Guinea FImage: Mice (genus rattus)Image: Guinea F	Pigs □ Cats □ Dogs	☐ Sheep/Goats ☐ Cattle ☐ Swine han Primates ☐ Poultry		
Are you currently housing live anima	Is at your institution?	Yes 🗆 No		
If you are not currently housing li having live animals in your facilit				
*LAWP permits are issued to those institu animals for teaching and/or research and and facilities to properly and humanely c	d have the appropriate programs	5		
Does your laboratory/institution have (If Yes, attach a copy of the Committee members)	an Animal Care Committ	ee? ØYes □No		
Since your last application, have the animal care and use procedures (i.e control, environmental management (If Yes, please explain)	. feeding programs, diseas	se v		
Note: Any procedures that require the withholding of feed and water or exposing the animals to adverse or unusual conditions should be documented in your animal use protocols and approved by your IACUC.				
Living animals are used for (Check all that apply):				
 Diagnostic Procedures Experimentation Public Display Other: 	□ Farm Pro □ Public H	n/Teaching Demonstrations oduction ealth/Disease Survellience		
Are animals used in studies with human infectious agents? Yes Volume Vo				
Registration/Accreditation Type:				
□ AAALAC Accredited	USDA Registered	□ None		
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CURRENT DATA	INDICATE CHANGES HERE
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Mattingly, Bruce	
Title:	annan 1999 - Shanda Alan annan ann an 1999 ann an 19
Dean	
Telephone Number:	
607-753-4312	
Work Hours:	Work Hours:
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TUE: 8:00 am to 4:30 pm	Tue: to Wed: to
WED: 8:00 am to 4:30 pm THU: 8:00 am to 4:30 pm	Thu: to
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to	Sun: to
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Alaimo, Rose	Wagner, Rebecca DVM
Title:	
DVM	DVM
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570-829-4030	60/817/180
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Crossroads Veterinary Clinic	136 North st
242 S. River St.	
Wilkes Barre, PA 18705	Dryden NY 13053
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TUE: 8:00 am to 5:30 pm	Mon: Tue: Wed: 8 am to 1 pm
	Tue: Tue:

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SAT:

8:00 am

to

to

12:30 pm

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9 am

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Sat:

Sun:

CURRENT DATA				INDICATE CHAN	GES HERE	
Contac	t Person (N	ame):				
Funk, A	ndrew					alinear and a support of the second secon
Title:	- Hite in the second		······································			4
Bio. Ins	truct, Tech.					
Teleph	one Numbe	r:	· · ·			
607-75	3-2722					
Work H	lours:		and a second	Work	Hours:	
MON:	7:00 am	to	3:30 pm	Mon:	to	
TUE:	7:00 am	to	3:30 pm	Tue:	to	
WED:	7:00 am	to	3:30 pm	Wed:	to	
THU:	7:00 am	to	3:30 pm	Thu:	to	
FRI:	7:00 am	to	3:30 pm	Fri:	to	
		to		Sat:	to	
		to		Sun:	to	

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Signature, Laboratory/Institutional Officer

Dean, Autst Sciences

Date

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Address 2:	
City, State, Zipcode:	
Cortland, NY 13045	
Site Telephone Number:	
607-753-2770	· ·
Site Fax Number:	
Site E-mail Address:	
Contact Person (Name):	
Peck, Joshua	

IACUC Membership for SUNY Cortland

December 12, 2018

Dr. Mary Beth Voltura, Associate Professor of Biological Sciences (Chair)
Dr. John Straneva, Associate Professor of Biological Sciences
Dr. Joshua Peck, Associate Professor of Psychology
Mr. Andrew Funk, Biological Sciences Technician
Ms. Amy Markowski, Environmental Health and Safety Specialist
Dr. Joanne Siciliano Jones, Community Member
Dr. Rebecca Wagner, D.V.M.

SUNY Cortland Animal Care Staff 2018-2019

Name	Full/Part-time	Title	Education Level
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Scott Suhr	Part-time	Laboratory Helper	B.A.
Mary Beth Voltura	Part-time	Associate Professor	Ph.D.
Joshua Peck	Part-time	Assistant Professor	Ph.D.
Andrew Funk	Full-time	Support Technician	B.S. in Biology