## Membership of the IACUC

Date: January 15, 2020	)					
Name of Institution: State University of New York College of Environmental Science and Forestry						
Assurance Number: D16-00943						
IACUC Chairperson						
Name*:Christopher Whipps						
Title*: Professor			Degree/Credentials*:Ph.D.			
Address*: (street, city, state, zip code) (b) (6) Illick Hall 1 Forestry Drive Syracuse, New York 13210-2778						
E-mail*:cwhipps@esf.ed	du					
Phone* (b) (6)		Fax*:		(b) (6)		
IACUC Roster		·				
Name of Member/ Code**	Degree/ Credentials	Position Ti	tle***	PHS Policy Membership Requirements****		
Robert Quinn	DVM, DACLAM	Veterinaria		Veterinarian		
			(b) (6)	Scientist		
				Member		
				Nonscientist, Nonaffiliated member		
				Scientist		

\*\*\*\* PHS Policy Membership Requirements:

Veterinarian Veterinarian with training or experience in laboratory animal science and

> medicine or in the use of the species at the institution, who has direct or delegated program authority and responsibility for activities involving

animals at the institution.

Scientist practicing scientist experienced in research involving animals.

Nonscientist member whose primary concerns are in a nonscientific area (e.g.,

ethicist, lawyer, member of the clergy).

Nonaffiliated individual who is not affiliated with the institution in any way other than

as a member of the IACUC, and is not a member of the immediate family of a person who is affiliated with the institution. This member is expected to represent general community interests in the proper care and use of animals and should not be a laboratory animal user. A

consulting veterinarian may not be considered nonaffiliated.

[Note: all members must be appointed by the CEO (or individual with specific written delegation to appoint members) and must be voting members. Non-voting members and alternate members must be so identified.]

<sup>\*</sup> This information is mandatory.

<sup>\*\*</sup> Names of members, other than the chairperson and veterinarian, may be represented by a number or symbol in this submission to OLAW. Sufficient information to determine that all appointees are appropriately qualified must be provided and the identity of each member must be readily ascertainable by the institution and available to authorized OLAW or other PHS representatives upon request.

List specific position titles for all members, including nonaffiliated (e.g., banker, teacher, volunteer fireman; not "community member" or "retired").

## **Facility and Species Inventory**

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Name of Institution: State University of New York College of Environmental Science and Forestry						
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Laboratory, Unit, or Building*	Gross Square Feet [include service areas]	Species Housed [use common names, e.g., mouse, rat, rhesus, baboon, zebrafish, African clawed frog]	Approximate Average Daily Inventory			
(0) (4	3,500	Zebrafish	600			

<sup>\*</sup>Institutions may identify animal areas (buildings/rooms) by a number or symbol in this submission to OLAW. However, the name and location must be provided to OLAW upon request.