**INFORMATION SHEET FOR ANIMAL OWNERS**

I wish to invite you to participate in my research project, described below.

My name is Click here to enter text. and I am conducting this research as part of my Click here to enter text. in the School of Click here to enter text. at the Fiji National University. My supervisors/co-researchers are Click here to enter text. and Click here to enter text.

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| **Research Project** | | *The title of the project goes here*  Click here to enter text. |
| **Aim of the Research** | | This research aims to explore Click here to enter text. |
| **What will the study involve** | | *For example, animals will receive training using positive reinforcement (food rewards) by experienced trainers and handlers. Training sessions will be kept short, and animals will be rested or retired from training activities if showing any signs of fatigue or disinterest.*  Click here to enter text. |
| **Animal Management** | | *Animals will be housed at the* Click here to enter text. *for a period of* Click here to enter text. *weeks. The facility will have/be (temperature controlled, undercover, etc.) Animals will be fed* Click here to enter text. *and given free access to water and exercised (daily, twice daily, weekly, etc.)* |
| **Unforeseen Risks** | | Unforeseen risks might arise at any time during the research study. The research investigators will promptly inform owners of all animals participating in the research and of any new information that may affect their willingness to participate. |
| **Financial Implications** | | There will be no cost to you for the participation of your animal(s) in the research study. You will not be charged for any of the procedures performed solely for the study’s purpose. You will receive no reimbursement for the participation of your animal(s) in the research study. Fiji National University does not provide compensation or therapy for any injuries or losses that may occur as a result of participation in the research project. If the animal is insured, you are advised to notify the insurer of involvement in a research project. |
| **Confidentiality** | | Owner and animal confidentiality will be maintained. No identification of individuals will be made when reporting or publishing the results of the research study. |
| **Participation is Voluntary** | | Choosing to allow your animal(s) to be involved in this activity is voluntary, and I respect your right to withdraw your consent at any time without consequences. You do not need to provide any explanation if you decide to withdraw your animal before the completion of the study or not to participate your animal(s) in the research study. If you withdraw, any data collected about your animal will be retained by FNU for analysis. |
| **Use, storage & disposal of information** | *Information from the study may be used in academic journal articles and conference presentations. Information will be stored on FNU’s institutional repository. It will be kept for a minimum of five years, after which it will be disposed of by deleting all relevant computer files.* | |
| **Approval** | This project has been approved by the Animal Research Ethics Committee of the Fiji National University (Approval NoClick here to enter text. Valid to Click here to enter a date.). | |
| **Researchers**  **Contact Details** | *If you have any questions or concerns relating to the project, please feel free to ask at any point.*  Name*:*Click here to enter text.  Position Title*:* Click here to enter text.  Email: Click here to enter text.  Phone Contact: Click here to enter text. | |
| **Complaints** | Should you have any complaints concerning the manner in which this research is conducted, please contact:  Manager Research Grants & Ethics  Secretary- Animal Research Ethics Committee  Email: [shailin.gonelevu@fnu.ac.fj](mailto:shailin.gonelevu@fnu.ac.fj)  Phone: +679 3394000  Extension: 2981 | |
|  | Thank you for considering this request, and I look forward to further contact with you.  Regards,  *Researchers Name signature*  Click here to enter text. *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *Date:* | |