



DEPARTMENT OF HEALTH and HUMAN SERVICES

PUBLIC HEALTH SERVICE
NATIONAL INSTITUTES OF HEALTH

FOR US POSTAL SERVICE DELIVERY:

Office of Laboratory Animal Welfare
Division of Assurances
6705 Rockledge Drive
RKL 1, Suite 360, MSC 7982
Bethesda, Maryland 20892-7982
Home Page: <http://grants.nih.gov/grants/olaw/olaw.htm>

FOR EXPRESS MAIL:

Office of Laboratory Animal Welfare
Division of Assurances
6705 Rockledge Drive, Suite 360
Bethesda, Maryland 20817
Telephone: (301) 496-7163
Facsimile: (301) 402-7065

Date: October 1, 2015

Reference: Animal Welfare Assurance
Approval Letter for #A3331-01

Jeffrey M. Cheek, Ph.D.
Associate Vice Chancellor for Research Administration
Institutional Official
North Carolina State University
Administrative Services III
2701 Sullivan Drive
Raleigh, NC 27695-7514

Dear Dr. Cheek:

I am pleased to inform you that The Office of Laboratory Animal Welfare (OLAW) reviewed and approved the renewal of your institution's Animal Welfare Assurance (Assurance) that was submitted in compliance with the Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals (Policy), as revised August 2002.

Your Assurance renewal, number **A3331-01**, became effective on **October 1, 2015** and expires on **October 31, 2019**. This Assurance supersedes all previously issued Assurances. ***Please include the Assurance number in all correspondence to OLAW.*** A copy of the Assurance signature page is enclosed.

The Assurance is a key document in defining the relationship of your Institution to the PHS. It sets forth the responsibilities and procedures of your Institution regarding the care and use of laboratory animals. Among the important elements of the Assurance, I would especially call your attention to the reporting requirements that are essential for continued compliance with the PHS Policy. Please note that a Report to OLAW is required at least once every 12 months. The reporting period is the calendar year. Reports, for the previous calendar year, are due **January 31**.

Sincerely,

Venita B. Thornton, DVM, MPH
Senior Assurance Officer
Office of Laboratory Animal Welfare

cc:

IACUC Chairperson
Regulatory Compliance Officer / Administrator

VII. INSTITUTIONAL ENDORSEMENT AND PHS APPROVAL

A. Authorized Institutional Official

Name: Jeffrey M. Cheek

Title: Associate Vice Chancellor for Research Administration

Name of Institution: North Carolina State University

Address: Administrative Services III, 2701 Sullivan Dr. Raleigh, NC 27695-7514

Phone: 919.513.2148

Fax: 919.515.2711

E-mail: jeff_cheek@ncsu.edu

Signature: 

Date: 8/17/2015

B. PHS Approving Official

Name:

Title: **Venita B. Thornton, D.V.M., M.P.H.**
Senior Assurance Officer, Division of Assurances
Office of Laboratory Animal Welfare (OLAW)

Address: **NIH/OD/OER**
6705 Rockledge Drive
Phone: **RKL 1, Suite 360-MSC 7982**
Bethesda, Maryland 20892-7982
thorntov@od.nih.gov

Fax:

E-mail:

Signature: 

Date: 10/1/15

C. Effective Date of Assurance: 10/1/15

D. Expiration Date of Assurance: 10/31/2019